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Educating women for development : from welfare dependency to a practical nursing career.

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EDUCATING WOMEN FOR DEVELOPMENT:
FROM WELFARE DEPENDENCY TO A PRACTICAL NURSING CAREER

A Dissertation Presented

by

RUTH DWORKIN SHERMAN

Submitted to the Graduate School of the
University of Massachusetts in partial fulfillment
of the requirements for the degree of

DOCTOR OF EDUCATION

May 1992

School of Education

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FROM WELFARE DEPENDENCY TO A PRACTICAL NURSING CAREER

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RUTH DWORKIN SHERMAN

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Maurianne Adams, Chairperson


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DEDICATION

To

Martin

Eric and Rachel

ACKNOWLEDGEMENTS

During the past two decades my professional work has provided me with the distinct privilege of developing educational and training programs for poor and undereducated women who were committed to improving their lives and those of their children through furthering their education. The courage, fortitude, and determination of these women were the inspiration for this study.

I want to express my sincere appreciation to all of the women who through the course of this study generously shared with me their own personal journey of self-discovery and self-development. These women contributed greatly to my own growth and development and their personal stories were a continuing source of inspiration and support to me throughout this study.

Tremendous appreciation and gratitude is owed to my committee whose guidance shaped this project and made its completion a reality. Maurianne Adams, the Chair, who generously provided wisdom and encouragement throughout this project; E. Ann Sheridan who read each page of this project with an exacting eye and an insightful mind; and Jay Carey, who provided his thoughtful expertise.

Finally, the support and interest of colleagues, as well as the prodding of friends and especially family were, of course, vital to the completion of this undertaking.

ABSTRACT

EDUCATING WOMEN FOR DEVELOPMENT: FROM WELFARE DEPENDENCY TO A PRACTICAL NURSING CAREER

MAY, 1992

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Using the qualitative methodology of grounded research, this study sought to discover whether or not internal developmental changes are fundamental to the transformation process of moving from welfare dependency to self-sustaining, economic self-sufficiency among welfare dependent mothers who enroll in highly structured academic and career related training programs to become practical nurses. To realize their goal of welfare independence, subjects entered a grant-funded, community college Career Access Program in Nursing which offered a progressive hierarchy of career ladder steps including Patient Care Assistant training, Developmental and Academic coursework, and Licensed Practical Nurse preparation.

Utilizing eight welfare dependent mothers as subjects and an interview protocol modeled on developmental

principles, the researcher tracked the transformation process as indicated by changes in self-identity, movement towards autonomy, and cognitive growth, and analyzed situational, economic, and other demographic themes. Within the context of the study is an analysis of the potency of gender, class, and socioeconomic status on issues of female dependency and empowerment; the impact of age and stage on readiness patterns of welfare dependent mothers; and the relationship of gender related themes of affiliation and interdependence on women's career choices, maternal relationships, and learning preferences.

The study's most important finding emerged within the realm of psychosocial change. The results indicated that a welfare dependent mother's ability to reconstruct her gender role to encompass a self-identity which is both psychologically and economically autonomous is core to her successful transformation process.

This dissertation presents a "process model of change" which depicts four discrete, invariant, domain specific stages of change which are embedded within the transformation process: Precondition, Transition, Reconstruction, and Independence. This model subsumes the multiple changes acquired by the subjects in the external arena of skills and knowledge competencies, as well as within the internal domains of psychological and cognitive functioning. This model contains constructs from which

intervention strategies may be developed aimed at reducing welfare dependency through education and empowerment, as well as for evaluating the effectiveness of intervention programs proposed to promote long term, economic self-sufficiency among welfare dependent women.

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C H A P T E R I

THE PROBLEM

Background of the Problem

Female-headed families account for a growing disproportionate share of the poverty in the United States and are the poorest of all major demographic groups. Studies of female headed families find that the poverty of single mothers is directly related to their primary, devalued role as caregivers in our society and their subsequent dependency on the secondary employment sector for jobs (Kreisberg, 1970; Pearce, 1978; Ehrenreich & Stallard, 1982; Hartsock, 1983; Gilbert, 1984; Sidel, 1986; Barret, 1987; Miller, 1987; Stromquist, 1988). Insofar as women often are and sometimes expect to be economically dependent upon men, a marriage broken by death, divorce, or desertion, or a pregnancy outside of wedlock, too often threatens the undereducated mother and her children with poverty and subsequent welfare dependency.

Although welfare dependency is often described as an economic problem, it is in fact an economic manifestation of a convergence of social problems caused by rapid changes in demographic and social trends (Women's Work Force, 1981; Ehrenreich & Stallard, 1982; Thurow, 1985; Besharov & Quin,

1986; Sidel, 1986; Kozol, 1988). Root causes of welfare dependency are found in decades of gender, age and wage discrimination in the workplace; growing rates of divorce among families with dependent children; rising numbers of teenage pregnancies; lack of enforcement of child support laws; and the rising number and longevity of widows. Present government policies toward welfare dependent women, particularly in the area of education and job related training, are not only woefully inadequate, but also serve to perpetuate the state of poverty in which single mothers are often found (Pearce, 1978; Ehrenreich & Stallard, 1983; Gilbert, 1984).

In order to address the growing problem of single mothers and their children facing an impoverished future, public policy makers along with educational planners must become advocates for the expansion of postsecondary educational opportunities for welfare dependent women. Participation in community college programs which provide career related training and entry into primary job markets has proven to be an intervention strategy for transforming the lives of poor women caught in the vicious cycle of welfare dependency (Allen, 1970; Handler & Hollingsworth, 1971; Levitan, Rein & Marwick, 1972; Coles, 1979b; Gilbert, 1984; Morris & Williamson, 1986; Heintz, 1986; Burghardt & Fabricant, 1987; Ellwood, 1988; Final Report of the Nursing

CAP Advisory Board, 1989; Grub, Brown, Kaufman & Lederer, 1990; Jencks & Edin, 1990).

Research to date has documented some of the external changes which take place in the lives of welfare dependent women who successfully completed a community college education and job training program, and as a result, become productively employed and welfare independent (Coles, 1979b; Gilbert, 1984; Davidson, 1986; Herbers, 1987). These external changes are manifested in an increased standard of living and an improved labor force attachment. However, it is the confluence of these external changes in combination with specific internal changes which together define and measure these women's successful transformation to self-sustaining, economic self-sufficiency.

Evidence of the internal changes which comprise a significant component of the transformation process experienced by former welfare dependent mothers warrants closer study and documentation. Such documentation is needed to marshall support and promotion of the vital role postsecondary education has to play in promoting self-sustaining change in the lives of welfare dependent women. Educators and policy makers who are charged with developing academic and job training interventions which are meant to promote long term stability and economic self-sufficiency among welfare dependent women will benefit from a clearer

understanding of the important internal changes which post-secondary participation brings about in the areas of individual cognitive and psychosocial functioning -- changes which are important to assuring independence and self-sustaining economic self-sufficiency.

Therefore, the coexistence and interrelatedness of the external and internal changes which are manifested in graduates of postsecondary career related training programs merit careful study and the internal cognitive and psychosocial characteristics which comprise this internal change process need to be documented. A better understanding of the research findings related to this change process will be of significance to educators who seek to develop effective educational environments which foster positive, self-sustaining change among disadvantaged groups, as well as to social policymakers responsible for allocating funding resources aimed at breaking the vicious cycle of long term welfare dependency.

Statement of the Problem

During the past two decades the number of women who have become dependent upon public welfare as a means of economic support has increased dramatically (Levitan et al., 1972; Women's Work Force, Inc, 1981; Joe & Rogers, 1985; Bassi, 1986; Axinn & Stern, 1987; Besharov & Quin, 1987; Ellwood,

1987; Women's Bureau, 1988). Major causal factors which contribute to long term welfare dependency are inadequate education (Thomas, 1973; Coles, 1979a; Stein, 1982; Bassi, 1986; Ellwood, 1988; Kozol, 1988), insufficient career preparation (Handler & Hollingsworth, 1971; Joe & Rogers, 1985; Morris & Williamson, 1986; Burghardt & Fabricant, 1987; Jencks & Edin, 1990) and the lack of well paying job skills (Levitan et al., 1972; Schiller, 1973; Ehrenreich & Stallard, 1982; Rodgers, 1986; Sidel, 1986; Donovan, Jaffe & Pirie, 1987). These barriers are formidable for women seeking economic self-sufficiency for themselves and their children.

Once becoming economically reliant upon welfare, commonly referred to as Aid to Families with Dependent Children (AFDC), many women soon discover that long term reliance upon the public welfare system is counterproductive to their individual growth and development and provides them with little hope for a promising future (Horgan, 1988; Ingram, 1988; Kozol, 1988; Benjamin & Stewart, 1989; Jencks & Edin, 1990). Many of these welfare dependent women come to view further education and job related training as the most viable route out of a life of economic impoverishment into a life of economic self-sufficiency (Coles, 1976b; Henderson, 1988).

The social policy goal of reducing women's dependence on welfare by enabling them to become self-supporting through participation in education and job training dates back to

federal legislation passed in the early 1960s (Grub et al., 1990). Although the social policies of the 1960s had supported up to four years of college enrollment for welfare dependent women, the dollars allocated to such efforts scarcely addressed the overwhelming need (Gilbert, 1984; Grub et al., 1990; Jencks & Edin, 1990). During the past thirty years, federal legislation allowing collegiate education for welfare dependent women has steadily declined, despite a job market which increasingly demands more complex levels of knowledge and skills among its workforce. Recent federally funded programs emphasize immediate job placement or short term job training for low paying, dead-end jobs that relegate welfare dependent women to the secondary job market and the vicissitudes of an economic marketplace in constant flux (Gilbert, 1984; Jencks & Edin, 1990). Although large numbers of welfare dependent women are employed, they continue to be welfare dependent because their work wages do not provide adequate income to raise them out of poverty (Williams, 1975; Ellwood, 1988, Jencks & Edin, 1990).

Despite this dismal history of providing substantial numbers of welfare dependent women with the necessary educational resources to become economically self-sufficient, some women on welfare do manage to enroll in and successfully complete publicly funded community college educational and career training programs which provide them with the preparation and skills requisite to become gainfully

employed and economically self-sufficient (Coleman, 1985; Collins, 1985; Herbers, 1987; Henderson, 1988). At Bristol Community College in Fall River, Massachusetts, the Career Access Program (CAP) in Nursing has been cited as a Massachusetts model for its success in providing welfare dependent women with the requisite academic preparation and work related training necessary to become employed as practical nurses (Executive Office of Human Services, 1988).

The transition from welfare dependency to economic self-sufficiency and the resultant internal personal transformation process which is experienced by such women who successfully complete a community college program remains unexamined. Most often the transformation process experienced by welfare dependent women has been reduced to and measured in external quantitative terms; that is, the tax dollars gained in general revenues due to the tax contributing status of these newly employed women (Albert, 1988; Burns & Llamas, 1988) or in an analysis of the cost-effectiveness of the training program in which they had participated (Coleman, 1985; Bassi, 1987). Although quantitative studies exist which document external outcomes, research which provides an understanding of the internal process involved in achieving these outcomes is lacking.

Therefore not only is the documentation of these externally derived quantitative measures of change and success important, but equally as important is the

documentation of qualitative changes in cognitive and psychosocial functioning which are experienced by welfare dependent women who successfully complete a collegiate level educational and job training preparation program and become economically self-sufficient. Educators and administrators who formulate programs and policies aimed at improving the lives of welfare dependent women would benefit greatly from an increased understanding of the dynamics comprising these internal changes. College educators would profit by using this knowledge in the design of educational interventions, the development of academic support services, and the implementation of educational policies which are intended to promote self-sustaining change among welfare dependent women. Social policy administrators informed by such knowledge would be better able to prioritize and channel scarce funding resources to educational and support service interventions which promote long term change, rather than wasting scarce public dollars on changes which are short term and ephemeral.

In conclusion, when a woman who has become dependent upon a welfare support system enters a community college educational and job skills training program and masters the required knowledge and work related skills necessary to become economically self-sufficient, she undergoes a transformation process which has cognitive, as well as psychosocial dimensions (Belenky, Clinchy, Goldberger, & Tarule, 1986; Stromquist, 1988). Empirical observations and

anecdotal evidence from program directors and counselors, along with testimonies from former program participants, typically characterize successful program graduates as having gained self-esteem and a more positive self-concept (Coles, 1979a, 1979b; Stein, 1982; Herbers, 1987; Henderson, 1988; Benjamin & Stewart, 1989). Scant research exists, however, to describe the characteristics and interrelationship of the cognitive and psychosocial changes which comprise this transformation process, what underlying conditions foster positive change for the welfare dependent female adult learner, and whether particular tasks of adult development are specific to welfare dependent women enrolled in collegiate educational and job preparation programs (Belenky et al., 1986; Stromquist, 1988). Recognizing the need for further research in this area, this study contributes to the literature by identifying the characteristics and interrelationship of the transformation process vis-a-vis the cognitive and psychosocial dimensions which underlie this personal transformation process, as well as identifying the educational enablers which promote positive change among welfare dependent female adult learners.

Purpose of the Study

Limited knowledge exists about the nature of the internal change process experienced by welfare dependent mothers who undertake academic preparation and training

(Belenky, 1986). The purpose of this study is to extend the knowledge base on the transformation process by identifying the cognitive and psychosocial changes experienced by welfare dependent mothers as they engage in preparation for careers as practical nurses. This transformation process is examined and analyzed through its manifestation in selected program participants who move through the four discrete hierarchical components of the Career Access Program in Nursing sponsored by Bristol Community College of Fall River, Massachusetts.

The Career Access Program in Nursing prepares educationally and economically disadvantaged individuals for entry into and career mobility within the nursing profession by providing program participants with the academic coursework and support services they require to become practical nurses. Each program component builds upon the learning acquired from the previous program component while requiring increasingly difficult levels of task mastery and academic preparation on the part of each program participant. This program design intentionally creates a continuity of hierarchical movement for program participants from initial access into the program to final program completion.

For the purpose of this research study which examines individual change, four sequential, hierarchical program transition stages have been delineated: the Patient Care

Assistant Training Component, the Developmental and Academic Coursework Component, the Practical Nurse Preparation Component, and Employment as a Practical Nurse. Depicting the internal changes experienced by welfare dependent mothers who successfully complete the various components of the Career Access Program in Nursing not only facilitates better understanding of the change process, but also broadens appreciation of the implications of movement from welfare dependency to economic, self-sufficient participation in the world of work.

Significance of the Study

Female-headed families account for a growing disproportionate share of the poverty in the United States and are the poorest of all major demographic groups (Pearce, 1978; Rogers, 1986; Sidel, 1986; Women's Bureau, 1986). As the number of households headed by poor single women with children continues to increase, a careful examination of the transformation process experienced by welfare dependent mothers who successfully complete a community college educational/training program, and as a result, master the skills required to earn an adequate income to become economically self-sufficient is increasingly critical.

Little has been written about welfare dependent mothers who have pursued higher education. Case histories, nor longitudinal studies of welfare dependent mothers who have

completed a collegiate program are not maintained by most public welfare agencies or postsecondary institutions. Except for occasional anecdotes in the press, little documentation exists about the effect that successful completion of a postsecondary program has on the lives of welfare dependent women and their children.

This research study analyzes the key elements of success which promote the change process and suggests practical applications for policymakers and program planners who craft educational interventions aimed at addressing issues of economic self-sufficiency among welfare dependent women. The study's elucidation of the characteristics of cognitive and psychosocial growth involved in this change process supports the implementation of specific educational and support service strategies to facilitate the developmental process and increase the opportunity for success among other welfare dependent women. Gaining a clearer understanding of the transformation process experienced by the participants in this research study provides a context for analyzing the experience of welfare dependent women who enter other types of educational/training programs and are not successful. Furthermore, this analysis of the transformation process experienced by welfare dependent mothers within the specific program context of this research study provides insight into developing appropriate interventions for other disadvantaged adult groups with similar educational/training needs.

Research Questions

The dynamics explored in this study are those related to the cognitive and psychosocial aspects of the transition process of welfare dependent women who undertake a career preparation educational experience in order to gain the knowledge and skills required to move them from welfare dependency to economic self-sufficiency. The primary research question which is addressed in this study is: What are the cognitive and psychosocial characteristics which comprise the transformation process experienced by welfare dependent women who complete a structured academic and career training program which allows them to move from welfare dependency to self-sustaining, economic self-sufficiency? Because this work was exploratory in nature, a number of interrelated research questions were identified which emerged from the focus of the primary research question. As noted in some detail in a subsequent chapter, the methodology used in carrying out this study was naturalistic inquiry based on grounded theory methods. Therefore, the final research questions emerged in their explicit form in the process of the research.

The questions below served as the basic framework for this inquiry and indicate the primary focus of the initial phase of the research process. The interrelated questions which were addressed in this study related to uncovering the

dynamics involved in the transformation process of welfare dependent women and were as follows:

- 1) What aspects of human development -- cognitive, psychological, and/or social -- are involved in this change process and what are the interrelationships? What are the specific internal characteristics and outward manifestations related to each aspect once identified?
- 2) Is this change part of a developmental process characterized by an invariant sequence and a hierarchical relationship? What is the effect of skills acquisition and task mastery on individual development and subsequent outcomes?
- 3) How does the life experience and life stage of these adult women impact their development? How are specific tasks of adult development managed by welfare dependent women?
- 4) What are the characteristics of collegiate educational environments which foster development and promote positive change among welfare dependent mothers? What are the enablers and inhibitors which can be identified as critical to this process?

Description of the Career Access Program in Nursing

At Bristol Community College in Fall River, Massachusetts the Career Access Program in Nursing (CAP) was developed to respond to the education and work related needs of welfare dependent mothers who sought access to and

preparation for well-paying, stable occupations in the primary job market in order to become economically self-sufficient. In addition, the Career Access Program was designed to respond to the critical national shortage of trained health care personnel by preparing nontraditional populations for entry into the field of Nursing. Because this occupational training program addressed the training needs of an underserved and disadvantaged population, while responding to a national manpower shortage, during the past four years program development and operational funds have been granted from a variety of federal, state, and local agencies involved in adult training programs and economic development initiatives. Funding resources have included the Massachusetts Department of Occupational Education, MassJobs Southeast, and monies from the Job Training Partnership Act and the Massachusetts Medical Security Labor Shortage Initiative fund.

The Career Access Program in Nursing targets educationally and economically disadvantaged populations as potential program participants and recruits individuals from the ranks of dislocated workers, displaced homemakers, and welfare recipients. Each target group shares the common characteristic of requiring further education and training in order to secure the type of employment situation they require to maintain their long term economic self-sufficiency.

Expanding the supply of well-prepared caregivers has become a significant mandate given the unprecedented changes in the delivery, in the organization, and in the financing of health care during the decade of the 1990s. On the demand side, these changes have resulted in a growing need to increase the number of educated nurses which lends support to statistical evidence that the nursing shortage is primarily demand driven. On the supply side, however, fewer potential entrants to the profession are viewing nursing as an attractive career alternative (Department of Health and Human Services: Final Report, 1988; Executive Office of Health and Human Services, 1988).

The Career Access Program in Nursing is especially designed to address the national shortage of nurses, while also meeting the educational and employment needs of welfare dependent mothers. The program's recruitment efforts focus on nontraditional populations, primarily individuals who historically because of educational background, economic disadvantage, age and/or race, have had limited access to entering the health professions. Training these new populations for positions in the health care field not only increases the available indigenous labor pool, but also strengthens its diversity. Linking the economic needs of welfare dependent mothers with the labor shortage needs of the job market has proven to be a successful strategy to address these two critical social problems; and, to date,

program outcomes have documented impressive gains among program participants (Final Report of the Nursing CAP Advisory Board, 1989). These gains of program participants include internal changes, both cognitive and psychosocial. Gaining a better understanding of these changes is vital to the ongoing improvement of this program and to the design of future education/training interventions for welfare dependent mothers and other adult populations with similar needs.

Performance as a practical nurse requires highly specialized skill mastery which includes critical thinking skills, managerial expertise, a high degree of disciplined self-management, and well-honed decision-making skills. These characteristics may not be manifested in non-traditional groups of incoming students and must be developed within the scope of their educational experience. In preparing nontraditional populations, such as welfare dependent mothers for entry into nursing, an understanding of their cognitive and psychological profile is relevant to responding to gaps that may exist in their cognitive, self-management, and decision-making skills in order to equip them to perform comparably with nurses who enter the field from more traditional backgrounds.

The Career Access Program in Nursing provides program participants with a series of sequential educational components to prepare them for practical nursing careers. Participants from each of the four distinct components of

the program were included in this research study for the purpose of examining the change process from a longitudinal perspective. A description of each of the hierarchical components of the Career Access Program in Nursing follows.

1. The Patient Care Assistant (PCA) Training Component consists of an intensive eight week, 220 hours of training. This training is comprised of 60 hours of didactic lecture, 40 hours of laboratory experience, 100 hours of clinical experience and 20 additional hours to qualify participants for Homemaker/Health Aide Certification. The practical clinical experience is conducted at participating acute and long term health care facilities which agree to provide program participants full-time employment at a guaranteed wage upon successful program completion. Once employed, the Patient Care Assistant works under the supervision of a licensed nurse.

2. The Developmental/Academic Coursework Component consists of an individualized prescriptive developmental coursework sequence which is based upon a thorough assessment of each program participant's nursing career goals, prior educational background, and diagnostic testing results. The developmental (remedial) coursework which is offered to participants includes high school level Reading, Math, Algebra, Chemistry, and Biology. Extensive support services are also provided which include academic, personal and financial aid counseling; tutoring; child care referral; and

advocacy services. The academic coursework preparation consists of college credit courses in Anatomy and Physiology, General Psychology, and English. These courses are offered to program participants who plan to enter directly into associate degree programs of nursing and to students who enroll in licensed practical nursing (LPN) programs and plan to continue their nursing education in the near future. Students are able to concurrently enroll in a LPN program of study and in college level English and college level Psychology at their local community college in lieu of undertaking these subjects as part of their LPN required curricula. This component minimizes course duplication, assists students to acquire college credits applicable to the associate nursing degree program, and compresses the amount of time required to become a practical nurse.

3. The Practical Nurse Preparation Component consists of completion of the requirements of a ten month licensed practical nursing program sponsored by a local vocational-technical postsecondary program.

4. The Employment as a Practical Nurse Component represents independence from welfare for participants who enter this stage of the program. For these women self-sustaining, economic self-sufficiency has finally become a reality.

Limitations of the Study

Although this study clearly recognizes that structural barriers, including institutionalized poverty, oppression against women, and racism are root causes of welfare dependency and have profound effects on its victims, this study is delimited in that the primary focus and perspective of this research is on individual change, rather than societal change.

This study is limited in that the welfare dependent mothers who volunteered to become study participants all selected the nursing profession as their career choice, and therefore as a group, they may share particular characteristics which are distinct from other groups of welfare dependent women. In addition, the women who participated in this study were all enrolled in a highly structured, grant sponsored community college career preparation program and their change process may not be typical of welfare dependent women who experience other paths to self-sustaining, economic self-sufficiency. Further, this study is limited in that the transition experience and related developmental process of these welfare dependent mothers may not be generalized to welfare dependent men or to those who do not experience a structured, supportive postsecondary environment in making their transition.

Definition of Terms

Aid to Families with Dependent Children - An income

maintenance program for needy children and their mothers or other caretakers which is administered by state and counties with funds allocated by the federal government to cover basic necessities such as food, shelter, and clothing.

Associate Degree Nursing Program - A program that combines

education in the theory and practice of nursing with general education in the humanities and the behavioral, biological, and physical sciences. Associate degree nursing programs, are offered by community and junior colleges, and consist of four or five semesters of study and practice. Graduates are eligible to take the licensure examination to become a registered nurse.

Career Access Program in Nursing (CAP) - A highly structured

educational career ladder sequence which is designed to prepare disadvantaged adults for entry level positions in the health care system, as well as provide them with the requisite academic skills and support services needed to complete a practical nursing program.

Clinical Experience - The portion of nursing education that

takes place in the clinical setting, most typically a hospital or an extended care facility, where students learn how to provide direct and indirect nursing care for patients.

Cognitive Development - The hierarchical progression of an individual's thinking processes which is characterized by growth in intellectual functioning.

Dislocated Workers - Individuals who have been laid off due to a temporary or permanent plant closing and have little hope of returning to their former positions.

Displaced Homemaker - A woman who has been primarily a caregiver in the home, financially dependent on the income of a spouse, and has lost this source of support due to death, separation or disability.

Internal Change - A process characterized by transformation in an individual's cognitive and/or psychosocial functioning.

Practical Nurse Program - A non-degree program typically offered by a postsecondary vocational-technical school which prepares individuals for positions as licensed practical nurses.

Primary Job Market - Jobs which are characterized by full-time year round employment conditions, relatively high wages, job security, fringe benefits, opportunities for advancement, an increase in earnings over time, and due process in terms of job rights.

Secondary Employment Sector - Jobs which are characterized by low wages, little security, part time or seasonal variations, low fringe benefits, negligible opportunity for advancement, and little protection from arbitrary

employer actions, i. e. service sector jobs such as clerical and retail sales and factory assembly jobs.

Technical Nurse - A nurse who has completed an associate degree level of preparation.

Welfare Dependent - An individual who is reliant upon a public assistance program, such as AFDC, for primary economic support.

C H A P T E R I I

REVIEW OF THE LITERATURE

Organization of the Chapter

This chapter encompasses a preliminary literature review of three major topical areas related to the transformation process experienced by welfare dependent mothers who become economically self-sufficient through completion of a structured academic and career preparation program. The primary topical areas which are examined include:

- A. Characteristics of welfare dependent mothers
- B. Theories of development of welfare dependent mothers
- C. Educational environments which facilitate change among women

This literature review reflects current theory and emerging research on the three aforementioned topics. For the purpose of this study, the literature review contributed to the researcher's fundamental understanding of the characteristics of welfare dependent mothers, provided a theoretical framework for understanding the developmental process experienced by welfare dependent women, and contributed to the development of a conceptual basis for evaluating adult learning environments which promote change for women. This relevant knowledge was used to initiate the process of grounded theory research. Additional literature

references were added during the research process to verify the emerging theory.

This chapter is comprised of four sections. Sections one through three review theory and research related to the three major topical areas which comprise this study. The final section summarizes and integrates the theory and research related to this study.

The initial literature review search provided the basis for understanding existing theory and research related to the stated problem: What are the cognitive and psychosocial characteristics which comprise the transformation process experienced by welfare dependent women who complete a structured academic and career training program which allows them to move from welfare dependency to self-sustaining, economic self-sufficiency? The conceptual framework for this problem statement is grounded in the context of welfare dependency as it relates to a woman's lack of economic independence due to limited access to well-paying jobs, rather than implying any relationship between welfare dependency and individual pathology.

The major topical areas which comprised this initial literature search were explored to provide an insight into the discrete, but interrelated topics which formulate the research question, as well as to provide a basis for developing the initial theoretical framework. This initial literature review was augmented by an additional review which

was completed later in the study to illuminate particular issues which were uncovered during the conduct of the study.

Section One: Characteristics of Welfare Dependent Women

This section contains current research and theory related to welfare dependency. Both national and local descriptive statistical data regarding the characteristics of welfare dependent women are examined. A historical perspective regarding the evolution of the national public welfare system is discussed to reveal the genesis of current policies and modern attitudes regarding welfare dependency. In addition, consideration is given to the implications of the national Family Support Act of 1988, which required states to establish and implement welfare-to-work programs by October 1990 and compelled some groups of welfare dependent women to participate.

Demographic Characteristics of Welfare Dependent Women

In the United States, approximately 3.7 million families which comprise 11 million individuals receive Aid to Families with Dependent Children. The vast majority of these families, 90 percent, are headed by women (National Alliance of Business, 1988). In 1988, the Family Support Administration of the United States Department of Health and Human Services (1989) reported that approximately 3,233,000

female adults were receiving Aid to Families with Dependent Children (AFDC). Roughly half of all poor families are headed by women, and female-headed families with children are nearly five times more likely to be poor than other households (National Alliance of Business, 1988). In 1987, government spending to support welfare dependent families exceeded more than \$30 billion for AFDC, food stamps, and Medicaid benefits (National Alliance of Business, 1988).

Characteristics of race, marital status, and employment history of this welfare dependent population reveal that Black recipients comprise 39.8 percent of all AFDC recipients, White recipients comprise 38.8 percent, and Hispanic recipients comprise 15.5 percent (see Table 1).

Table 1

AFDC Recipients, Families, by Race

<u>Race</u>	<u>Number</u>	<u>Percent of Total Families</u>	<u>Percent of all by Race</u>
Black	1,503,000	39.8	21.2
White	1,465,000	38.8	2.7
Hispanic	585,300	15.5	13.3
Other	222,700	5.9	---
Totals	3,776,000	100.0	5.9

(Women's Bureau, U. S. Department of Labor, 1989)

According to Melendez and Petrovich (1989), Hispanic women remain the poorest, least educated major population in

the country. Of the 23 percent of Hispanic households which are headed by women, their mean income is only one-third that of Whites. The median years of schooling for Hispanic females in 1981 was 10.5 years; and in 1979, 34 percent of Hispanic women aged 16 to 24 were high school dropouts (Melendez and Petrovich, 1989).

An analysis of the marital status of single parent AFDC recipients finds that 15.1 percent of women on AFDC are legally separated or divorced, 16.2 percent are not legally separated, 53.2 percent have never been married, and 1.6 percent are widowed (see Table 2).

Table 2

AFDC Recipients, Single Parent Categories

<u>Type</u>	<u>Number of Families</u>	<u>Percent on AFDC</u>
One Parent Families:		
Legally Separated/Divorced	570,200	15.1
Not Legally Separated	611,700	16.2
Never Married	2,008,800	53.2
Parent Deceased	60,400	1.6

(Women's Bureau, U.S. Department of Labor, 1989)

The employment status of adult female AFDC recipients reveals that 5.8 percent are employed full or part time, but their earnings do not provide sufficient income to allow them to become independent of welfare support. Another .2 percent

of female adults receiving AFDC are on lay-off which implies that they have been recently employed and 26.9 percent are seeking employment. In addition, 2.0 percent are enrolled in an educational program (see Table 3).

Table 3

Female Adult AFDC Recipients, by Employment Status

<u>Status</u>	<u>Number</u>	<u>Percent of Total</u>
Employed full time	61,400	1.9
Employed part time	126,100	3.9
On lay-off	6,500	.2
Seeking employment	869,700	26.9
Unknown	135,800	4.2
Not in labor force	1,855,700	57.4
Incapacitated	113,200	3.5
Enrolled in school	64,700	2.0
Totals	3,233,000	100.0

(Women's Bureau, U.S. Department of Labor, 1989)

An analysis of these data reveals that almost one third (32.9 percent) of adult welfare dependent women have had some labor force attachment. Either they are currently employed in a full or part time position, or they have been laid off from their most recent job, or they are actively seeking employment. However, for those women who have had some work experience, most often their employment has been in the

secondary job market in occupations that offer nor require skills training.

Employment Efforts and Work Motivation of Welfare Dependent Women

Substantial evidence exists to provide confirmation that the issue of welfare-induced dependency has been exaggerated. Available evidence on the dynamics of poverty and dependency suggests that many widely shared assumptions about welfare recipients are ill-founded. The popular image of unmotivated women solely relying on AFDC payments as a permanent way of life is belied by numerous empirical studies which decisively establish the fact that welfare dependent women move between welfare and work status, frequently in accordance with changing family needs and labor market circumstances (Levitan, Rein & Marwick, 1972; Schiller, 1973; Williams, 1975; Sidel, 1986; Burghardt & Fabricant, 1987; Bassi, 1987; Ellwood, 1987, 1988).

A welfare dependent woman's ability to work, as is the typical experience of most mothers, is very much contingent on the needs of her children and her other domestic responsibilities. Juggling work and childrearing obligations are most difficult for women during the early years when the mothering needs of their dependent children are greatest. When their children are young, the limited option of a low-wage, menial job combined with the relatively high cost of child care, serves to minimize a welfare dependent woman's

economic motivation to work. Poor female heads-of-households who do combine work and family obligations face the heavy physical and emotional burden of the "double day, double burden" -- exhaustive responsibilities during the day in the workplace and throughout the evening at home (Rosen, 1987).

To compare empirical evidence with widely held negative assumptions about the work effort of welfare dependent women, Schiller (1972) surveyed 52 studies of welfare recipients and concluded that "there is a high degree of mobility between employment and dependency status, and that simultaneous work and welfare status is common" (p. 20). Other studies have confirmed that very few AFDC recipients are permanently and irrevocably divorced from the labor market (Williams, 1975). In fact, virtually all of the women receiving AFDC who Williams (1975) studied, possessed some work experience and about half of them had worked within the recent past. Despite the fact that welfare dependent women tend to have poor occupational skills and insufficient schooling, resulting in potentially low earnings from employment, they still actively pursue work (Williams, 1975).

The extent of work effort, as well as the issue of work motivation among welfare dependent women remains commonly misrepresented and misunderstood, despite the fact that throughout the years considerable federal dollars have been allocated to research projects to address work motivation issues among welfare recipients. Based on his review of

sixteen federally funded research studies of actual work behavior, expressed aspirations and attitudes, and comparative profiles of the employed and the nonemployed poor, Schiller (1972) found the data to be markedly consistent -- welfare recipients do not require extraordinary world-of-work orientation or other forms of motivation stimulus. Schiller (1972) established that both groups -- the employed and the unemployed poor -- share virtually identical aspirations and attitudes and that some of the comparative studies even suggest that the poor have a stronger commitment to work than the nonpoor, "implying that the motivation issue is a middle-class conceit" (p. 22). Schiller (1972) affirms that what distinguishes the employed from the nonemployed poor at any point in time is not work ethic, but a combination of job opportunities and demographic problems. Even the rather conservative National Alliance of Business (1988) states in a recent report that "it is widely recognized that many, if not most, of these women would prefer regular employment to continued reliance on government support" (p. 1). Despite evidence to the contrary, the assumption that welfare dependent women need special stimuli to seek employment remains popular, and therefore has become the basis for many mandatory federal and state sponsored workfare programs.

Acknowledging that many of the causal factors which shape welfare dependency are macroeconomic and beyond the

individual's control, Ellwood (1987) maintains that "limited economic opportunity and wages remain an important direct cause of poverty for families headed by women" (p. 37).

Ellwood (1987) states that "it seems both impractical and unfair to expect all single mothers to work all the time...and to work all the time just to maintain their families at the poverty line seems absurd and extraordinarily harsh, particularly when one remembers that at least half of all our children (and thus half of all married mothers) will spend some period in single-parent homes" (pp. 37-38).

In fact, marriage, rather than from the economic returns of her own work efforts, is the most common way for a woman to leave AFDC (Ellwood, 1988). Marriage accounts for 34.6 percent of all exits from welfare, while increased earnings among women account for only 21.3 percent (Ellwood, 1988). The causal factors which prevent substantial numbers of welfare dependent mothers from earning their way to financial independence are much more likely to lie in the structure of the job market than in individual assets and liabilities (Schiller, 1972).

The widespread supposition that ample job opportunities exist for all welfare dependent women who are ready and able to seek them is belied by existing empirical studies which suggest that there is a tremendous gap between public expectations and labor market realities. Schiller (1972) cites the absence of job opportunities as "a major cause of

new and prolonged dependency" and argues that it is "preposterous to assume that job vacancies exist in abundance for those on welfare" (p. 25). Welfare dependent women are "trapped by limited opportunities, poor education, discrimination, and historical and institutional patterns that limit their possibilities for success in our society" (Levitan, 1972, p. 138).

In his study on the relationship between welfare dependency and work, Albert (1988) concludes that the "system does not adequately reward those who work" (p. 156). In order to encourage more recipients to become economically self-sufficient, an important welfare objective should be to build significant work incentives into the welfare benefit formula (Albert, 1988). Both the economists and the social scientist researchers agree that the most realistic approach to raise female-headed families out of poverty is to raise female incomes. Currently only 42 percent of the women who work in America earn enough to maintain their family's economic status above the poverty line (Thurow, 1985).

In 1990, women who work full-time, year-round still earn only 64 percent of what men earn and therefore must work longer hours to make equivalent wages of men (Sidel, 1986). This society-wide form of economic disadvantage and gender-based discrimination reveals a pattern of inequality that structurally impedes the job entry, career mobility and financial independence of welfare dependent women.

Because work and receipt of welfare payments are often treated as mutually exclusive in the public's perception of welfare dependency, the ability of welfare dependent mothers to enter the labor market and earn some money has typically been confused with their ability to achieve economic self-sufficiency. Levitan (1972) observes that work and welfare have typically been portrayed as substitutes "but for an increasingly large proportion of the population the choice is not work or welfare, but work and welfare" (p. x). When a welfare dependent mother makes a choice about whether to work or not to work, she experiences this choice within the constraints imposed by her gender, the context of differential labor market opportunities, and her place within her own life cycle.

Socioeconomic Characteristics of Long and Short Term Welfare Dependent Women

Longitudinal studies conducted by Ellwood (1987) document the fact that only a minority of AFDC recipients become long term clients of this system, which he defines as collecting AFDC payments for ten years or more. Fifty percent of all AFDC recipients receive welfare benefits for less than two years. These women do not become chronically dependent on the welfare system, but rely on welfare as a means of transitional support during a difficult period or following some major crisis such as divorce, job loss or death of a spouse (Ellwood, 1987). Short term users of the

welfare system typically share the following characteristics: lack of health limitations, responsibility for fewer dependents, and dependency upon welfare after experiencing a divorce which occurs when their children are older (Basi, 1987; Ellwood, 1988). In her extensive study of welfare and poverty, Sidel (1986) found that fewer than 20 percent of welfare recipients become chronically dependent upon the system which is consistent with studies by Kaus (1986) which found that only 10 to 15 percent of women who ever go on welfare remain dependent for eight years or more.

However, because long-term clients accumulate on the rolls over the years, Morris and Williamson (1986) point out that this group constitutes a majority of the recipients at any single point in time and consumes most of the program's resources. These long term AFDC mothers are more likely than short term AFDC recipients to be nonwhite, high school dropouts, and without previous earnings (Ellwood, 1987). They are also more likely to have become a household head by bearing a child (Ellwood, 1987). In fact, early childbearing significantly increases the likelihood that the mother and her child(ren) will require AFDC, that almost half of all AFDC expenditures go to households in which women bore their first child as teenagers, and that 60 percent of all teenage mothers receive welfare at some time in their lives (Sidel, 1986).

When compared with divorced mothers, never-married mothers experience more severe poverty and for longer periods; because on the average, they have less work experience, receive less child support, and have less education (Besharov and Quin, 1987). In fact, only 53 percent of never married mothers have a high school diploma, as compared with 77 percent of divorced mothers (Besharov and Quin, 1987). Indeed, the evidence is mounting that never married mothers will continue to comprise the majority of long term welfare dependent women and will become a permanent underclass.

The evidence which correlates lack of education and career related training with long term welfare dependency is clear and overwhelmingly convincing. In their extensive and insightful economic analysis of the dollar amount a single mother needs to provide a minimum standard of living for her family, Jencks and Edin (1990) report that "single mothers do not turn to welfare because they are pathologically dependent on handouts or unusually reluctant to work...they turn to welfare because they cannot get jobs that pay any better than welfare" (p. 32). Less than a quarter of all single mothers have spent any time in college, and a third have not even finished high school (Jencks and Edin, 1990). "A single mother without higher education can seldom find a job that pays enough to support her family" (Jencks & Edin, 1990, p. 41). In conclusion, "all these calculations lead inexorably

to one conclusion: an unskilled single mother cannot expect to support herself and her children in today's labor market either by working or by collecting welfare" (Jencks and Edin, 1990, p. 44).

Despite the rise in poor single parent households, Morris and Williamson (1985) found no convincing empirical evidence to support the claim that many low income, unmarried females bear children in order to become eligible for AFDC. Morris and Williamson (1985) found that illegitimacy was the result of unplanned and unanticipated pregnancies, and welfare receipt was more often the result, rather than the cause.

In addition, Morris and Williamson (1985) found that most adults in welfare families did not receive welfare as children, that most children from welfare families do not grow up to receive welfare themselves, and that the modest amount of intergenerational transmission of welfare which they could document was not caused by the attitudes of welfare dependent parents. In his study of all families who received AFDC funds between the mid-1960s and the late 1970s, Horgan (1988) found that only about one in five of the females reared in families "heavily" dependent on AFDC had become dependent themselves by the time they had reached their mid-twenties. The stereotype of heavy welfare dependence being routinely passed from mother to child, Horgan (1988) concludes, "is contradicted" (p. 32). Research

by Schiller (1972) and Sidel (1986) corroborate these findings; and in fact, Schiller (1972) found that welfare dependent mothers are generally dissatisfied with their status and with public welfare in particular, and that when confronted with few opportunities to achieve upward mobility themselves, welfare dependent mothers place added emphasis on their children's future.

Psychological Aspects of Welfare Dependent Women

An examination of the psychological aspects of welfare dependency must be clearly underscored by the fact that the existence of poverty can not be understood and eradicated through an individualistic psychological approach. Obviously the contributing role of economic, sociological, educational and other relevant forces is undisputable. From the outset, it is critical to acknowledge that structural changes within our social policies are required in order to raise female heads of families out of poverty and that the structural inequities of capitalism, along with sexism, racism, and ageism are major contributing causes of welfare dependency, rather than deviant or pathological behavior attributable to welfare dependent women.

Allen (1970) in his investigation of behavioral concomitants of poverty concludes that "poverty would certainly qualify as an instance of multiple determination, as opposed to a situation with a simplistic, unitary explanation...and that a psychological analysis in itself

will inevitably produce answers which are neither complete or final" (p. 4). Allen (1970) emphasizes that poverty is not a psychological concept, but an economic one; and although, poor people may be homogeneous in terms of their economic index, having the lack of financial resources as a common characteristic, does not necessarily imply the common possession of other characteristics such as psychological traits. In his thorough review of the literature on personality correlates of poverty, Allen (1970) summarizes by stating that "the quality of much of the research in the personality-poverty area is seriously deficient even when examined with charity" (p. 242). He found that failure to provide controls for obvious confounding effects such as influence of social class of the examiner, small and nonrepresentative samples, and measuring instruments of dubious validity were all too common (Allen, 1970). In addition, Allen (1970) declares that "sweeping generalizations have been made about poverty and personality on the basis of unsystematic observation and unwarranted inferences... and most of the demonstrated relationships between personality and poverty are quite weak" (p. 258). Upon finding a slight difference in personality between poverty and nonpoverty groups, Allen (1970) finds it curious that often times the difference is emphasized rather than stressing the even larger degree of similarity. Allen (1970) concludes that negative psychological findings regarding poor

people are still widely accepted as valid in the face of data that are ambiguous at best and overwhelmingly contradictory at worst due to the psychological tendency of scientists to sharpen the findings supporting their preconceptions and to ignore or forget findings that are discrepant. Although Allen (1970) is somewhat understanding of the tendency to simplify and bring order from chaotic conditions, he warns that it is incumbent upon us to take a long and objective look at available data, with as much freedom from the influence of preconceptions as possible.

Although many analysts continue to postulate the existence of a causal relationship between a women's negative self-concept and the development of a welfare dependency syndrome, Benjamin and Stewart (1989) state that there is "no research that provides convincing evidence that psychological states, per se, contribute to welfare dependency" (p. 165). From their study of self-concept and self-efficacy of poor Black and White women which was based on 290 structured interviews, Benjamin and Stewart (1989) conclude that patterns of public assistance are directly related to the persistence of structural barriers to upward mobility and that Black women are more adversely affected. Their study findings also reveal that the long term receipt of public assistance adversely affects both self-worth and the work orientation/perceived self-efficacy for all women, regardless of race. Benjamin and Stewart (1989) define work

orientation/perceived self-efficacy as the ability of individuals to produce and regulate events in their lives.

Over the past several centuries much of the research regarding welfare dependency has dichotomized the poor into two categories: the "deserving" poor and the "undeserving" poor. The deserving poor traditionally include individuals who because of age, illness, or disability are viewed as being poor through no fault of their own. The "undeserving" poor, however, are those considered able-bodied and lacking in motivation.

Many researchers have observed that women receiving AFDC are not considered to be among the "deserving" poor and that any assistance offered to those whose discretionary actions are believed to have contributed to their dire circumstances and dependency, has traditionally been given grudgingly (Handler & Hollingsworth, 1971; Levitan, et al., 1972; Morris & Williamson, 1986; Sidel, 1986). Therefore, welfare dependent women, and especially those who may be characterized by any of the following behaviors -- doing poorly in or dropping out of school; bearing a child outside of marriage; becoming divorced or separated; having an erratic work history; abusing drugs -- are associated with "undeservingness" in the mind of the public.

Based on their extensive literature review of the psychological characteristics of the poor, Morris and Williamson (1986) report that it is the theoretical

framework endorsed by adherents of the individualistic theory of poverty which perpetuates the claim that poverty resides in the internal characteristics of the "undeserving" poor. This theoretical viewpoint, which has received the most attention from social scientists over the past twenty-five years, suggests that the poor have values, attitudes, beliefs, and in some cases, belong to a culture that is not conducive to upward mobility. This "culture-of-poverty" thesis claims that poor populations remain poor because of their own values and attitudes.

The most frequently mentioned psychological themes referred to in the "culture-of-poverty" thesis are: strong feeling of fatalism and belief in chance; strong present-time orientation and short time perspective; impulsiveness, or inability to delay present gratification or to plan for the future; concrete rather than abstract thinking processes along with concrete verbal behavior; feelings of inferiority; acceptance of aggression and illegitimacy (Allen, 1970, p. 373).

Similar negative behavioral concomitants of the poor are also cited by Morris and Williamson (1986). These researchers found that the most frequently used characteristics to describe the poor were as follows: low need for achievement, low educational aspirations, low occupational aspirations, weak commitment to the work ethic, little ability to defer gratification, little ability to plan

for the future, strong present-time orientation, low self-esteem, feelings of marginality combined with feelings of helplessness and alienation, feelings of powerlessness, high external control, a sense of resignation, and a sense of fatalism (Morris & Williamson, p. 31). Burghardt and Fabricant (1987) also conducted research on attitudes towards the poor and concluded that "attitudes towards welfare recipients are often unrelentingly hostile" (p. 91). The most frequent behavioral characteristics that these researchers found ascribed to welfare dependent individuals were "lazy, shiftless, addictive, unwilling to work, and sexually promiscuous" (Burghardt & Fabricant, 1987, p. 91).

Based on their extensive review of the literature on the nature of poverty, Morris and Williamson (1986) conclude that the individualistic theory of poverty is of little practical significance for explaining poverty in any large-scale sense. Their research confirms the findings of many earlier studies which found that the poor are not substantially different than the nonpoor on most motivational dimensions (Allen, 1970; Pearl, 1970; Thomas, 1973). The overwhelming majority of lower economic class individuals seek an education, occupation, and income that would move them out of poverty (Morris & Williamson, 1986). On motivational dimensions, no convincing evidence of significant differences between the poor and nonpoor has been found and the work ethic is endorsed as strongly by the poor

as the nonpoor, "even when the sample of poor respondents is composed of welfare recipients" (Morris & Williamson, 1986, p. 33).

Additional counterevidence against individualistic theories of welfare dependency is provided in Thomas' (1973) exploratory study of the attitudinal characteristics of welfare mothers. Thomas (1973) found that neither continuous time on public assistance, nor total cumulated time ever on public assistance, appears to be related in any meaningful way to less positive responses on the following major attitudinal areas: attitude toward work, belief in the future pay-off from hard work, feeling about government income support, feeling of pessimism, feeling of personal happiness, feeling of personal competence, and feeling of social powerlessness. Furthermore, increased extent of welfare dependency -- operationally defined in terms of a ratio between cash public assistance benefits and total family income from all sources -- was not associated with increasingly negative attitudinal characteristics. Thomas (1973) did find, however, that the two background characteristics most strongly associated with increased duration of welfare dependency were poor health and low educational levels. Thomas (1973) concludes that "the assumptions about the alleged negative attitudinal characteristics of welfare recipients -- either as a cause or

an ill effect of welfare dependency -- may be seriously in error" (p. 7362).

Four major tenets which underlie the well-entrenched mythology which psychologists and other social scientists perpetuate which serve to prevent the poor from escaping from poverty are as follows: the poor are constitutionally inferior due to genetic influences (Jensen, 1970); the poor are victimized by accumulated environmental deficits which lead to cognitive deficiencies; the poor are inadequately socialized resulting in negative affective characteristics; and the poor are encapsulated within autonomous, self-sustaining cultures which generate unique values and norms (Pearl, 1970). From this widespread mythology, many of the negative attributes of the poor are derived; and, it is this mythology which supports the argument that if the poor can be diagnosed as sick, then they own the problem and their condition is a consequence of their infirmity, rather than a reflection of an inequitable and inadequate social structure (Pearl, 1970, pp. 348-354).

In the last analysis, poverty is not so difficult to fathom. "Basically," Allen (1970) states, "poverty results when people have little money...and in our society people have little money because they either are without jobs or they are in low-paying jobs or because the allowances they receive in welfare are too small for a life of decency or dignity" (p. 258).

Despite this counterevidence that the psychological composition of welfare recipients is not significantly different from other groups of people, theorists such as Murray (1982) are representative of the conservative viewpoint which endorses the notion that poor people's rededication to work, excellence, and moral uplift will be adequate to resolve the problem of welfare dependency. Murray (1982) asserts that the problems of the poor stem from liberalized rules of the welfare state that foster dependency and undermine self-respect and self-reliance. Murray (1982) concludes that mandatory work programs, instead of welfare, along with moral and social re-education programs provided by self-help and voluntary religious and civic organizations, instead of publicly subsidized job training programs, are the best strategies to attack the problem of welfare dependency. As Ellwood (1986) points out, adherents of this philosophical viewpoint regard the welfare system as "a narcotic that destroys the energy and determination of people who are already suffering from a shortage of such qualities" (p. 6).

Despite strong evidence which disputes the fundamental philosophical roots of the conservative viewpoint, public perceptions of welfare dependent women remain distorted. As Ellwood (1986) reminds us, perhaps it is because the issue of welfare dependency brings some of our most precious values --

involving autonomy, responsibility, work, family, community, and compassion -- into conflict.

Historical Roots of Negative Attitudes Toward Welfare Dependency

Ascribing negative psychological characteristics to welfare dependent women is deeply rooted in America's earliest treatment of the poor. According to research conducted by Joe and Rogers (1985) and Sidel (1986) American treatment of the poor is rooted in the Elizabethan Poor Laws of sixteenth century England and in the American Colonial Poor Laws. These laws established for the first time civil or governmental responsibility for relief for the poor. During the eighteenth and nineteenth centuries, poor persons, often referred to as paupers, were believed to be individually guilty for their poverty. Paupers were recognizable by their extreme state of moral degeneracy, drunkenness, vice, corruption, and criminality. In a society which revered initiative, work, and individual capacity, failure to earn a living was blamed on individual weakness. Poor individuals were considered lazy, incompetent, and disgraceful and as a result were treated as outcasts and undesirables. With the prevailing assumption being that the poor could get work if they wanted it, welfare relief was made as disagreeable as possible in order to discourage dependence.

During the nineteenth century, reformers believed that widowed mothers should be considered among the "deserving" poor and should not be blamed for their poverty. States and localities began providing special aid called "pensions" to widows without any related humiliating investigation and stigma. At first, only widows with children were eligible for the newly enacted Mothers' Pension program. However, by 1926, eligibility was expanded to include mothers who were divorced and mothers whose husbands had deserted them or had become incapacitated or imprisoned.

The Mothers' Pension program became subsumed under the larger Social Security Act of 1935, and at this stage of development, the American welfare system was conceived as a means to protect an already glutted Depression-era labor market from being flooded by would-be workers, widows and deserted wives, the disabled, and the aged. Aid to Dependent Children (ADC), under the Social Security Act of 1935, became a federally constructed and subsidized cash assistance program which made payments to needy families on behalf of children deprived of support due to parental absence, disability, or death. For fifteen years ADC provided funds only for dependent children. Not until 1950 did Congress add a caretaker grant to provide for the mother's essential expenses and as a result changed the name of the welfare program to Aid to Families with Dependent Children (AFDC). In the 1950s, welfare was viewed as a

temporary expedient, necessary to ease the adjustment problems of female heads of families. By 1962, however, policymakers recognized that the welfare system was failing to function as a form of temporary aid and that intervention programs were needed to prevent the development of permanent welfare dependency among women. The year 1962 marked the initial development of a series of welfare-to-work programs which were based primarily on the "individualistic" theory of welfare dependency.

The Aid to Families with Dependent Children (AFDC) program is currently the largest of the public assistance programs, both in terms of total expenditures and number of recipients. Burghardt and Fabricant (1987) note that the biggest growth in the AFDC program occurred during the period between 1970 and 1982, when "the number of families headed by women increased by 195% and that these families were disproportionately poor" (p. 95). This spiraling pattern of women's impoverishment became so clear that the President's 1981 National Advisory Council on Economic Opportunity wrote:

All others things being equal, if the proportion of female-headed households were to continue to increase at the same rate...., the poverty population would be composed solely of women and their children before the year 2000 ...To the extent that there have been "winners" in the War on Poverty during the 1970s, they have been male--and mainly white...The feminization of poverty has become one of the most compelling social facts of the decade (Women's Work Force, 1981, p. 1).

As Joe and Rogers (1985) emphasize, AFDC was designed not to prevent poverty, but rather to help already poor families cope with economic hardship. The major role of the AFDC program is to lessen the extent of a family's poverty rather than to lift them above the poverty line. This is clearly documented by the fact that in 1983, 76 percent of all families receiving AFDC payments were living below the official poverty line (Morris & Williamson, 1986, p. 66).

Joe and Rogers (1985) conclude that the AFDC program has become a "catch all" program charged with remedying a wide variety of social ills and contend that:

It has acquired these functions because of the inadequacies of other social systems that should be integral parts of an overall approach to reducing poverty. AFDC has assumed responsibilities that more appropriately belong to the employment and training programs, the educational system, health institutions, and vocational rehabilitation programs. The welfare system should be the safety net of last resort, not the first line and only defense against poverty. The welfare system's accountability for a whole host of social problems has masked the fact that the resulting costs are not strictly welfare costs. Instead, they are the price of the failure of the economy and of other service agencies to effectively provide low-income individuals with the means to become economically self-sufficient (p. 135).

Federal Responses to Reduce Welfare Dependency

It is interesting to note that the philosophical underpinning of the original social security legislation of 1935 was to provide financial assistance to mothers so they

would not be forced to work outside the home. During this period, the prevailing social norm dictated that a mother's proper place was in the home nurturing her children; and in fact, mothers who worked outside the home were often considered to be "negligent" in their maternal role. This attitude that mothers in need of economic assistance should not be forced out of the home into paid work prevailed into the early 1960s.

During the 1960s, when greater numbers of women with children began to enter the workforce, Americans began to view staying home with children as a luxury for only those mothers who could afford to do so. In the early 1960s, women represented only about 30 percent of the workforce; by 1986, however, women comprised 45 percent of the workforce. Changing social norms shaped public sentiment which no longer supported a welfare dependent woman's right to remain home to care for her children; and in fact, during the 1980s public sentiment toward welfare dependent mothers who did not work became increasingly hostile.

Beginning in 1962, to encourage welfare dependent women into the workforce, a series of federally funded, but initially voluntary job training and work-related programs were developed. These programs included the Community Work and Training Program established in 1962; the Work Experience and Training Program established in 1964; and the Work Incentive Program (WIN) established in 1967. None of

these programs, however, had the monetary resources or the required commitment of the individual states to make a significant impact on the problem (National Alliance of Business, 1988). Even though WIN participation was made mandatory in 1971, the program was not funded at a level that made it possible to enroll all mandatory participants; and therefore, the program remained limited in scope and virtually a voluntary program (Grub et al., 1990).

More restrictive developments in welfare-to-work programs were initiated during the Reagan administration in which a number of states began to establish their own programs. Most of these programs relied heavily on job search training to the exclusion of education or vocational training, work experience, or on-the-job training. Of the participants enrolled in these programs only 3.2 percent received remedial education, 2.3 percent received job skills training, and 1.6 percent were enrolled in postsecondary education (Grub et al., 1990).

Another serious result of the Reagan administration policies was the legitimization of negative attitudes held by many Americans towards the poor. The prevailing political ideology supported the notion that the poor are poor because they are lazy; that they are free-loaders; that they are corrupt; and, above all, that if the government did not provide them with so many benefits, they would get jobs, work hard, and become upstanding citizens (Sidel, 1986). This

ideology supports many of the assumptions which generally form the basis for the welfare-to-work programs: that workfare will discourage malingerers; workfare will improve participants' job skills and work habits and thereby help them achieve economic independence; and that workfare will provide useful community work in return for welfare payments.

After careful review of every systematic study on workfare programs as far back as 1962, Burghardt and Fabricant's (1987) findings refute each of these assumptions upon which workfare programs are designed. None of the studies which Burghardt and Fabricant (1987) reviewed demonstrated any skill development or heightened employability; at best, welfare recipients were provided with "make-work to do". Burghardt and Fabricant (1987) conclude that "this unending litany of programmatic failures reflected in work-related job programs for welfare recipients must therefore be analyzed within the overall economic context... only when these work-related job programs are supported with a modicum of training, income, and supervision, do participants respond well" (p. 105). In addition, Burghardt and Fabricant (1987) found that these workfare programs did not contain either the incentives in the form of adequate wages, potential for upward mobility, skill development, or the supports in the form of child care to impact substantial movement into the job market. They observed that "too often, these programs have been used to

harass AFDC beneficiaries and remove them from the rolls for noncompliance" (Burghardt & Fabricant, p. 157). In conclusion Burghardt and Fabricant state that:

It is most unfortunate that job programs having the potential of positively transforming the lives of welfare beneficiaries and their families are structured not to affect such change but rather to further regulate and destabilize the existence of this group of citizens. The consequence for AFDC families is that they have been placed in a no-win situation of being forced to participate in dead-end job programs while concurrently being expected to progress toward independence and self-sufficiency. This is but one of the contradictory tendencies embedded within the debate on welfare programs that on the one hand rhetorically argues for independence and on the other structurally denies beneficiaries the opportunity to progress toward self-sufficiency (p. 157).

These findings support the proposition that current welfare practices, and in fact, the very nature and structure of the welfare system in the United States, are fundamentally an effort to regulate the political and economic behavior of the poor.

The Family Support Act of 1988 is the most recent development in the thirty year history of welfare-to-work programs and its stated purpose is to "reduce long term welfare dependency" (Grub et al., 1990). The Act establishes the Job Opportunities and Basic Skills (JOBS) program, which requires all states to develop welfare-to-work programs within federal guidelines and compels healthy welfare recipients with children older than three years of age to

participate. The array of services which states may choose to offer under this program include: a wide range of work-related preparation, including remedial education, vocational training, postsecondary education; job search; support services; community work experience, on-the-job training, and private sector work experience. In theory, the Act creates a mechanism to fund comprehensive services designed to compel welfare recipients to work -- the strategy envisioned by the welfare reforms of the 1960s that were never fully implemented. Although it is too early to fully assess the education and training components of the JOBS programs because the Family Support Act did not require state JOBS programs to become operational until October 1990, Jencks and Edin (1990) state "like countless earlier attempts at welfare reform, the new law is unlikely to change much" (p. 31).

The recent findings of Grub and others (1990) support Jencks and Edin's limited optimism regarding the new Family Support Act. In their extensive case study analysis of newly implemented welfare-to-work programs in seven states, Grub and others (1990) found that most welfare-to-work programs are focusing their resources on job clubs and job search assistance and funding very little job training or vocational education because of its duration and cost. Only California, however, has implicitly decided to increase state expenditures on welfare recipients through the education

system, rather than through the welfare system by allocating welfare-to-work program funds specifically for classroom training.

Grub and others (1990) report that some fundamental problems in welfare-to-work programs have already surfaced which affect their potential effectiveness. One of the foremost problems stems from the inequities among states in determining eligibility levels and welfare benefits. Benefit levels vary tremendously from state to state and are as much as three times higher in some wealthy states than in poorer states or in those states which have a history of being hostile to welfare recipients. Grub and others (1990) hypothesize that because the Family Support Act of 1988 provides no mechanism for equalizing welfare services across the country, that these differences will probably be replicated in welfare-to-work programs.

A second problem which will limit welfare dependent women's efforts to become economically self-sufficient involves the fiscal decision by some states to concentrate primarily on job search services, rather than on longer term education and training. As Grub and others (1990) warn:

For those with serious educational deficiencies and no labor market experience--this approach can doom them to move into temporary, low skilled, low-paid jobs from which they are likely to return to the welfare system. Indeed, a good deal of evidence indicates the importance of more extensive education and training for such individuals. The evidence demonstrates serious basic skill deficiencies of welfare

recipients and corroborates the importance of longer and more intensive education (pp. 51-52).

In their report, Grub and others (1990) conclude that the welfare-to-work programs have the potential to develop in one of two directions. They could become effective mechanisms for reducing welfare dependency, especially among long-term welfare recipients who lack basic skills and labor market experience; or, they could develop into programs that cycle large numbers of welfare recipients into low wage jobs, creating the illusion of success without making any dent in welfare expenditures. The current political climate indicates that many states will succumb to the latter, for as conflicting fiscal priorities mount, the will to fund extensive job training and education services for welfare recipients will decrease and individual states will choose instead to concentrate on low cost job search activities.

Barriers to Economic Self-Sufficiency for Welfare Dependent Women

The new industrial changes that are transforming the workplace in dramatic ways have had an especially negative impact on poorly educated, unskilled women (Sidel, 1986; Rosen, 1987). Good economic opportunities for working class women have diminished with the massive restructuring of worldwide industrial production and the new international

division of labor which has resulted in the loss of high wage, unionized, manufacturing jobs (Rosen, 1986).

Competition with women employed on Third World global assembly lines has translated into a loss of a once relatively stable source of viable employment for uneducated, untrained female heads of households.

Although women have moved into the labor force in significant numbers, the jobs which they are holding have not dramatically changed during the past century. In 1870, the ten leading occupations of women workers in order of numbers of women were: domestic servants, agricultural laborers, tailoresses and seamstresses, milliners and dressmakers, teachers, cotton mill operators, laundresses, woolen mill operators, farmers, and nurses (Sidel, 1986). Servants remained the largest category until 1950, when they dropped to fourth place and were replaced by stenographers, typists and secretaries. In 1970, secretaries and various kinds of office workers comprised three categories out of the top ten; four out of the remaining seven -- teachers, sewers and stitchers, nurses, private household cleaners and servants -- had been on the 1870 lists (Sidel, 1986). The three remaining occupations were retail sales clerks, waitresses and cashiers. The major change over the hundred year period was the shift from agricultural work and employment in textile mills to office work (Barret, 1987). Today, almost

60 percent of all working women are employed as either clerical or service workers (Foster, Siegal, & Jacobs, 1990).

Despite some noteworthy advances made in women's educational attainment and employment opportunities, occupational segregation still prevails. For instance, in 1989, women comprised 95 percent of nurses versus 20 percent of physicians; 98 percent of kindergarten and pre-school teachers versus 39 percent of college professors; 83 percent of those in apparel sales versus eight percent of "big ticket" items; 99 percent of dental assistants versus nine percent of dentists; and 88 percent of data entry clerks versus 29 percent of computer systems analysts (Foster et al., 1990).

Eighty percent of employed women are still clustered in 20 of the 420 occupations listed by the Bureau of Labor Statistics. These occupations tend to be characterized by low wages, little security, absence of fringe benefits, few opportunities for advancement and minimal on-the-job training. Most of these jobs would not offer an economic solution out of welfare dependency (Sidel, 1986). Concentration of women in low paying occupations, their ghettoization within male dominated professions, and their lack of upward mobility, translate into a lower average wage. In 1988, women college graduates who worked full time, year round, had earnings roughly on a par with male high school graduates (Foster et al., 1990). As Barret (1987)

states, "female jobs have traditionally been and remain undervalued because of their association with unpaid work in the home and because women are not seen as important economic providers" (p. 103).

Despite the major economic barrier which the practice of occupational segregation presents, research has identified some salient attributes which characterize those women who are most likely to move off the welfare rolls. Handler and Hollingsworth (1971) conducted an extensive study of 766 welfare dependent families residing in six Wisconsin counties and found that women who successfully exited from welfare were better educated, were white, and had smaller families. For those who had at least some high school education, the rate of successful exit was twice that of those with less education. In addition, women who left welfare were more connected with others and their community as evidenced by their closer ties with relatives, friends, and their church, as well as, their ability to make more use of their welfare caseworker for special need items. If these welfare dependent mothers had problems in areas other than welfare, such as trouble with their landlord, nonsupport from husbands, or difficulty with the police, they were more likely to turn to lawyers for assistance. Women who remained dependent upon welfare seemed to be more confined in their patterns of activity.

Women who are more likely to leave welfare have advantages of race and education, and are able to make somewhat better use of the welfare system. Moreover, they have stronger ties to the outside world, in that they are better able, overall, to deal with society as it is constituted. "It is what a woman brings with her to welfare, rather than what the welfare resources do for her, that shapes her possibilities of leaving and her decision to do so...women must mobilize themselves for welfare exit and not look to the welfare agency for more than financial assistance and minimal service" (Handler & Hollingsworth, 1971, pp. 189-91).

Based on her extensive interviews with almost 100 poor women in twelve states from coast to coast, Sidel (1986) concludes that for women, whether single, divorced, or separated, to lift themselves out of poverty generally takes:

Extraordinary stamina, commitment, and courage. These women must wend their way through the maze of social service agencies--many of them hostile; of job training programs--many of them leading no where; of public opinion that holds that a women, particularly a woman with children but without a man, is clearly a failure--and somehow make a life for themselves. To be poor, single, and female with children to support, is to have very few options in an exceedingly harsh world" (pp. 46-47).

The research cited clearly documents the vital role of education and the importance of reinforcing social skills that will lead to empowerment as strategies to move welfare

dependent women to self-sustaining, economic self-sufficiency. Acknowledging that educational interventions alone will not eliminate all welfare dependency among women, nonetheless educators have an important role to assume in shaping policy initiatives which focus on the relationship between postsecondary training for women and issues of poverty and dependency. Programs for welfare dependent women which provide opportunities to obtain postsecondary career preparation "have proven themselves to be viable routes from poverty to long term self-sufficiency" (Women's Work Force, 1981). Current national policies aimed at dismantling these programs, will foreclose for women, avenues of escape from poverty.

Morris and Williamson (1986) suggest that in order for training to have a substantial economic impact on participants the following conditions must be fulfilled: participants must possess or develop the motivation and ability necessary to learn the skills being taught; the model of skill training that is used in the program must be educationally sound; training must be at a sufficiently high skill level to qualify program graduates for jobs paying non-poverty wages; these jobs must actually be available in the communities where program graduates reside; and, program graduates must have the ability and motivation to hold onto these jobs once they obtain them.

Jencks and Edin (1990) state that welfare dependent women must have access to relevant experiences, education, and training and that educational level is much more powerful than either cognitive abilities or motivational traits at predicting future earnings. They suggest that the positive relationship between education and income is only partly explained by the skills one acquires in school because to a certain extent employers appear to reward credentials in making hiring decisions.

As Pearl (1970) points out, "one of the major reasons poverty is maintained is that we have evolved into a credential society and that the fastest growing, highest paying, and most statusful industries require many years of formal training before one is allowed entrance into the lowest rung of the career ladder" (p. 354). This viewpoint is also supported by Schiller (1972) who found that a major factor which limits the pay off of vocational training is the employer practice of hiring on the basis of restrictive credentials. Schiller (1972) admits that although this practice often has no relevance to actual job requirements, it is nevertheless common and may negate the concept of enhanced employability via vocational training.

Although employment and limited training approaches remain popular with policymakers and the public as witnessed by the passage of the Family Support Act of 1988, the fact

that employment and training strategies can only eliminate poverty to the extent that they directly enable participants to obtain jobs at nonpoverty wages remains the formidable challenge for educators. Clearly, educational and training interventions designed to provide self-sustaining, economic self-sufficiency for welfare dependent women must include postsecondary academic credentialing coupled with sufficient career related preparation and training for stable, well-paying careers. Although perhaps a costly approach in the short-term, the long term gains to this country's economic and social well being in terms of new taxes collected, increased family stability, and the cumulative beneficial effects on children who will no longer face a dismal life in poverty make for sound public policy.

Implications for Long Term Change and Development

According to Levitan, (1972) employability is a complex balance of economic, social, and psychological factors. On the supply side, "employability is usually associated with work experience, education, and skills, and the absence of certain barriers, including health problems, child care responsibilities, and work disincentives" (p. 55). In order to address the issues of long term change and development of welfare dependent women, Levitan (1970) suggests that economic disincentives to enter the labor force must be

removed and employment income be integrated into the welfare benefit structure by insuring that the reduction in benefits are less than any increase in employment earnings until the family reaches a predetermined level of income that is above the poverty line. This approach, which is supported widely by economists and social scientists, recognizes the growing interdependence between welfare and work and that for ever increasing numbers of women that the two go together.

Convincing economic data is presented by Jencks and Edin (1990) to support their rather controversial assertion that "we should allow all single mothers to collect AFDC" because to ensure that every single mother could support herself and two children from her earnings alone, she would need a minimum wage of at least \$9 an hour in 1988 (pp. 47-49). Jencks and Edin (1990) acknowledge that the vast majority of single mothers without higher education cannot usually earn enough to support themselves and their children and this fact will remain true even if we "get more welfare mothers to return to school and provide more and better job training" (p. 48).

If all single mothers were allowed to collect AFDC, according to Jencks and Edin (1990), significant economic and social benefits would accrue. First, more single mothers would work in the official economy where jobs usually provide more valuable experience and pay better than "off-

the-books," underground jobs which welfare mothers are now forced to take to support their families. Second, single mothers would no longer have to choose between keeping their families together and breaking the law by working in the underground economy. Third, material hardship would decline among single mothers, and it would decline most among those working single mothers who now obey the welfare laws and report their low wage job earnings (p. 49). Jencks and Edin (1990) conclude that "if we really made work pay for single mothers, the welfare rolls would shrink dramatically and that a program for making low wage work economically attractive could win broad political support, and more importantly would reinforce rather than subvert the work ethic" (p. 50).

In the research study that follows, the lives of eight mothers who have been welfare dependent are examined. Although each woman's life history is unique and personal, common life themes experienced among these women emerge. Each of these woman's welfare experience brings to life the stark statistics, the research study findings on welfare dependency cited within this literature review, and the theoretical constructs which describe a woman's place within our economic, social, and political structure. The first hand accounts of these women's welfare dependency experiences add immeasurably to better understanding the multi-faceted issue of educating welfare dependent women for development from a psychosocial and cognitive perspective.

Section Two: Introduction

The literature which addresses women's development is undergoing a rich infusion of new theory based on the recent work of Miller (1976), Gilligan (1977, 1983, 1988, 1989), Lyons (1983), and Belenky, Clinchy, Goldberger, and Tarule (1986). Noteworthy as these new contributors have been to challenging existing assumptions on women's development and suggesting relationships that were previously unrecognized, significant research remains undone on the implications of gender, class, culture, and race on psychosocial, cognitive and moral development.

Theoretical perspectives of adult development have traditionally been categorized by means of three major conceptual orientations: age and stage theories (Erikson, 1950; Gould, 1978; Levinson, 1987); life events and transition theories (Lowenthal, Thurnher, & Chiriboga, 1975) and individual timing and variability theories (Neugarten, 1976). Most of this research on adult development, however, is conceptually limited in that the findings of these studies are based predominantly or exclusively on samples of white, educated, middle class adult males living in European-American cultures. People of color, individuals from the lower economic strata, recent immigrants, and adult females have rarely been included in the sample populations of research on adult development.

In light of the inadequacies of previous research on adult development, past theoretical formulations may not be readily applicable or easily transferable to understanding the developmental process experienced by welfare dependent mothers, especially women of color. As Desjardins (1988) points out, "too often, psychologists as well as researchers have listened to and studied men and then merely extrapolated from their findings to generalize about women" (p. 134).

The formulation of this literature review has been shaped by examining the process of adult development with particular focus on four significant areas: gender specific issues related to women's development; the influence of ascribed characteristics such as class, race and culture on development; the relationship of age and stage on welfare dependent women's development; and, the interplay of the competence domain with issues of agency.

Theoretical Foundations of Women's Development

As previously acknowledged, the unique nature and fundamental significance of women's development has long been obscured by the masculine bias for interpreting the human condition. Within the past two decades, however, a number of female researchers have made seminal contributions which offer a new paradigm for understanding women's development (Miller, 1976; Chodorow, 1978; Gilligan, 1977,

1983; Lyons, 1983; Schaef, 1985; Belenky et al., 1986; Gilligan, Ward & Taylor, 1988; Gilligan, Lyons, & Hanmer, 1989; Ruddick, 1989).

This pioneering literature on female development supports the existence of a gender relational bias in women's construction of social reality and calls for a re-evaluation of women's identity formation from the perspective of women's experiences of self in interpersonal relationships (Gilligan, 1977, 1982; Miller, 1976; Belenky, 1986). This distinctive gender related mode of describing the self in relation to others is based on a perspective of interconnection and interdependence which is manifested in relationships of caring, responsiveness, and concern for others. This relational mode of affiliation common to women is very different from the gender related male dominated perspective of self which has been identified as separate and objective (Kohlberg, 1969, 1976; Lyons, 1983; Gilligan, 1977, 1983, 1988, 1989).

These two distinctive gender related modes of viewing self and relationships are carried over into an individual's moral decisionmaking domain. Men most often use a justice and rights orientation as evidenced by their having a rationally based reason for their moral decisionmaking, while women most often use a care orientation which is underscored by a sense of connectedness and response to others. This

morality of care theme has been found to be a systematic, lifelong concern of individuals and not simply a temporary state or level specific concern (Lyons, 1983).

Extending this gender related theoretical framework of psychosocial and moral development to women's cognitive development, Belenky and others (1986) have contributed to a better understanding of how women learn. The orientation of connectedness has been shown to be related to women's ways of knowing and learning. Research has indicated that a woman's self-concept and way of knowing are interconnected and that women come to understand within the context of their own experience (Belenky et al., 1986). Among Belenky's sample population were poor women struggling to balance the multiple roles of student, mother, and homemaker in an effort to improve their lives. The findings of Belenky and others (1986) are of particular relevance to the inquiry of this study.

The discussion which follows examines issues of development relevant to welfare dependent women from a psychosocial, cognitive and moral perspective. Although it has been clearly established that within the complex process of development there exists considerable interconnection and influence of the psychosocial, cognitive and moral domains upon one another; for the purpose of analysis, this section of the literature includes an attempt to disentangle the

interwoven threads of these three domains and consider each as a distinct process of women's development.

Psychosocial Development

In Western culture, historical, cultural, and political forces have traditionally confined women to the lower status position relegated to subordinate groups, while men have positioned themselves as the dominant group with all the status, rights and privileges that this role affords (Miller, 1976; Schaef, 1985). The dominant male group defines what roles are acceptable for the subordinate female group, assigning them the less valued tasks, and reinforces its domination through impeding the development of subordinates by blocking "their freedom of expression and action" (Miller, 1976, p. 7). This unequal domination-subordination relationship between men and women shapes women's psychosocial development and reinforces their status of permanent inequality. Our culture, which is based on this primary inequity, projects onto women a devalued, culturally defined role which manifests itself in insidious ways; most notably, women find it difficult to believe in themselves and in their own abilities, thereby perpetuating the recursive cycle of subordination.

Many individuals view poor welfare dependent women as a substandard subset of the larger subordinate female group, and as a result, welfare dependent mothers find themselves living within a perilous social reality. By labeling welfare

dependent mothers as defective or dysfunctional, the dominant group discards them as "throwaways." Welfare dependent mothers who are raising their children without the presence of a male breadwinner defy the social order upheld by the dominant group and as a result pay an exceedingly high psychosocial price. For women, nonconformity to the standards of society's psychosocial expectations generally results in a negative backlash consisting of economic hardship, social ostracism, and/or psychological isolation.

The conceptual framework of "patriarchal necessity," defined as men's need to devalue and control women, offers another vantage point for more clearly understanding the psychosocial reality of a welfare woman's dependent role (Miller, 1987). The basic assumption of "patriarchal necessity" contends that women must remain in a dependent state, whether that dependence is based upon individual men through a marital arrangement or upon the State due to the absence of a man. This ideology of "patriarchal necessity" shapes our social welfare system and related cultural values and serves as a deterrent to formulating national economic policies which would support welfare dependent women to move towards self-sustaining, economic self-sufficiency. This cultural form of social subordination rationalizes why families without fathers are considered "broken" homes, why women on their own never can appear to be competent, and supports the prevalent assumption that a father is required

in the home because a woman cannot make it on her own.

Miller postulates that:

Control is maintained through the sexual division of labor and the institution of marriage with men in the public sector and women in the private sector in service to the public sphere. When women venture into the public arena, the dualities are maintained through occupational segregation of women...and economic control through low pay. The most effective control, however, is marriage. Unmarried women must be punished for their condition of "malelessness" through stigma, humiliation, sexual innuendo, and meager benefits. Above all, they must never seem capable of comfortable independence, either emotionally, socially, or economically (p. 291).

The fact that over 90 percent of families receiving Aid to Families with Dependent Children (AFDC) are headed by women, rarely by men, is considered to be part of the normative social order which delegates to women the primary responsibility of childrearing. When a marital relationship is terminated or a male fathers a child outside of marriage, women are most commonly left with the psychological, physical, and economic task of raising the child(ren) with scant social support forthcoming. Because of the manner in which our culture defines women's childbearing and childrearing functions, these roles remain major obstacles in a women's path to gaining authority, social power and economic independence.

Primary responsibility for child care consigns women in virtually all societies to the domestic or private sphere of life. These childbearing and childrearing functions central

to women's broader roles in society have had "profound effects on women's lives, on ideology about women, on the reproduction of masculinity and sexual inequality, and on the reproduction of particular forms of labor power" (Chodorow, 1973, p. 11). Welfare dependent mothers who must come to rely on the State for economic support are victims of this destructive social system that diminishes and devalues the role of the single female parent, sustains economic dependence and social subordination, and reinforces the dominant-subordinate social reality. The public welfare system remains a central location of women's oppression.

Evidenced from the plight of welfare dependent mothers is the fact that women's identification with the domestic sphere renders them particularly vulnerable when confronted with the role of sole supporter and caretaker of their families. Left within a framework of conceptions that offers no real economic, political or social power, their condition militates towards failure. Societal expectations which assume and reinforce the domestic secondary role for females are mirrored in the job market, as evidenced by the large numbers of women who are unable to secure work which will pay them the wages necessary to support themselves and their child(ren). Welfare dependent women typically find that the only job options accessible to them are in the secondary labor market which is comprised of low-paying positions and little opportunity for either advancement or

gratification. Welfare dependent women face exploitation by capitalism in the workplace and oppression within a social structure that constrains and stigmatizes them.

The dominant-subordinate model of the American social structure, which has been shown to have a penetrating influence on the identity formation of females, has its counterparts in societies throughout the world. Poor women throughout the world as Stromquest (1988) notes:

...are defined by patriarchal ideologies as wife-mother dyads...and this places women in the paradoxical condition of representing nurturing and altruistic authority in the family by basing this authority on the subordination of self. Altruistic women, devoted to family and children, are not always active citizens, don't develop identification with the society outside the family, and do not assert themselves in arenas beyond the domestic world (p. 12).

When women feel excluded from direct participation in society and are socialized to be dependent on authority figures, they perceive themselves as having no choices, and correspondingly excuse themselves from the responsibility that decisionmaking entails. Lack of a sense of self-efficacy, passivity, acquiescence, despair, and a sense of hopelessness manifest themselves as symptoms of this condition. The consequence of this psychic structuring may account for one of the major psychological barriers which prevents welfare dependent women from realizing self-sustaining, economically self-sufficiency. To mitigate this psychological barrier, as well as the barriers imposed by the

lack of social mobility, Miller (1976) suggests that women need "practice in the real world; this, plus the opportunity to practice, and the lifelong belief that one has the right to do so" (p. 35).

Central to women's psychosocial development, in addition to the dominant-subordinate dynamic, is the influence of the gender related attachment and affiliation needs of females with others. For women, the primacy of connection shapes their image of self and of relationships. Personality formation for women is very much defined by issues of attachment with a woman's sense of self being organized around her ability to make and then to maintain affiliations and relationships. This underlying ethic of care is a psychological logic of relationships for women (Gilligan, 1983).

A perspective on the genesis of the development of women's sense of attachment offered by Chodorow (1978) suggests that:

From the retention of preoedipal attachments to their mother, growing girls come to define and experience themselves as continuous with others; their experience of self contains more flexible or permeable ego boundaries. Boys come to define themselves as more separate and distinct, with a greater sense of rigid ego boundaries and differentiation. The basic feminine sense of self is connected to the world, the basic masculine sense of self is separate (p. 169)

For many women the threat or disruption of an affiliation is perceived not as just a loss of a relationship, but as

something closer to a total loss of self (Miller, 1976, p. 83). Many welfare dependent mothers who experience the disruption of a marriage, the disability of a husband or the loss of a provider become overwhelmed by the psychic trauma of redefining their self to themselves. Often these women have confused identity with intimacy by defining themselves solely through relationships with husbands, boyfriends, or other male authority figures.

Cognitive Development

Throughout a women's life span, growth can be measured not only biologically and psychologically, but also intellectually through a sequence of epistemological perspectives. The nature of knowledge and progression of thinking is characterized by a linear, progressive sequence of age related stages of cognitive complexity, each of which is characterized by a qualitative difference in the way the world is processed (Piaget, 1952; Perry, 1970). This gradual reorganization of intellectual development is marked by movement from the simple to the complex, from an external orientation to an inner orientation, from absolutism and dogmatism to an increased tolerance for ambiguity and uncertainty, and from a strong self-focus to a mature focus on interdependence with others (Perry, 1970). Progressive integration of previously inconsistent or contradictory experiences among individuals provides the challenge for cognitive reconstructing, that is new learning, which

revolutionizes the context in which future thinking is embedded (Piaget, 1952; Perry, 1970).

The theoretical framework for charting the cognitive developmental process of the post adolescent is credited to the pioneering research of Perry (1970). However, the major limitation of Perry's work lies within the bias of his sample group which was comprised of predominately white, well-educated males attending a prestigious private college. As a result, the study did not address, nor uncover, particular themes which might be specifically related to women's cognitive development.

A new paradigm for understanding how women learn and comprehend knowledge has been formulated in part from the research of Belenky and others (1986) which draws upon a broad based research sample of women from diverse ethnic, economic, and social backgrounds. Belenky's research offers three interrelated concepts for better understanding the development of adult female students which reinforce the intricate interconnection of "voice, mind, and self" (Belenky et al., 1986).

First, is the concept of "voice," which refers to a woman's ability to articulate her sense of self and is the construct which supports her to develop a sense of identity, efficacy, and competence. Women's "voice," first described by Gilligan (1982), is characterized as different from the majority culture and shows a particular sensitivity and

ability to engage in conversation that is exploratory (Tarule, 1988).

Given their lack of social, economic, and political power, some welfare dependent women often experience difficulty finding or speaking publicly in their own voice. In describing their lives, these women speak about voice and silence as a metaphor for their own intellectual development. Phrases such as "feeling deaf and dumb," "having no words," "listening to be heard," "being silenced," and "not being heard" are used by these women as metaphors to describe their sense of mind, self-worth, and feelings of isolation or connection to others (Belenky et al., 1986, p. 18).

The second important concept to better understanding women's epistemological development is that of "connected knowing." Connected knowing influences both the way a woman reasons and how she experiences that which is important in her learning environment. The concept of "connected knowing" is related to women's preferred mode of gaining knowledge, known as "connected learning."

Women prefer to learn in environments where teachers and learners construct knowledge together, nurture each others ideas, and value personal and experiential knowledge. Instructor approachability and classroom sociability reduce the anxiety level of adult learners and increase learning (Jarvis and Gibson, 1970). Women prefer cooperative or collaborative discussions over argumentative debates. Women

prefer teachers who present themselves as genuine and trusting of the learners' experiences. Applications of these gender related preferences in educational settings suggest that curricula be designed to include first hand experience and opportunities for women to define their own questions, that understanding and acceptance be valued over judgement and assessment, that collaboration be utilized over debate, that connection be emphasized over separation, and that instructors present themselves as colleagues. As noted by Harris and others (1989), to the detriment of women, education has been historically dominated by the adversarial model of learning where teachers "put forth opposing notions, encourage debate, and challenge students to defend their ideas, while providing few opportunities for collaborative, connected, cooperative learning" (p. 303).

The third concept, that of developmental position, influences how women learn and come to understand what knowledge is, how they relate to their teachers and peers, and how they experience their purpose in becoming educated (Tarule, 1988). Five distinct development perspectives, which were implied to be neither exhaustive, nor universal, were delineated by Belenky and others (1986). These five major categories draw heavily upon Perry's (1970) original work on epistemological perspectives and include the positions of silence, received knowledge, subjective knowledge, procedural knowledge, and constructed knowledge.

Included in Belenky's sample population were women attending an inner city community college which serves a mixed ethnic and lower socioeconomic population, as well as women who were affiliated with different community agencies serving individuals from lower socioeconomic groups (Belenky et al., 1986). Because some of Belenky's sample group shared similar characteristics to the women who were selected for this study, how these women viewed reality and drew conclusions about truth, the nature of knowledge, and the nature of both authority and of being authoritative oneself, may be relevant to gaining a better understanding of the epistemological development of the welfare dependent women who participated in this research.

In light of the fact that all of the participants in this study are mothers caring for dependent children, the concept of "maternal thinking" may be a relevant perspective for better understanding the cognitive development of welfare dependent mothers. The all encompassing role of mothering shapes the thinking of mothers, their sense of community with other mothers, and the activities they engage in (Ruddick, 1989). The study which follows attempted to account for particular themes of women's development which could be generated from listening to women describe the impact that their mothering experience had within their life cycle.

Moral Development

A major rethinking about how women make moral decisions can be credited to the ongoing theory building research of Gilligan (1977, 1983, 1988, 1989) and Lyons (1983). Although the classic work on moral development is associated with Kohlberg (1969) who advanced Piaget's concept of morality as justice into a major theory of moral development, the limitations of Kohlberg's research have been demonstrated due to the inherent biases resulting from his use of an exclusively male adolescent sample. Based on this single gender sample, Kohlberg (1969) constructed and validated a hierarchical, six stage model of moral development with the ideal level characterized by justice or fairness reasoning, objectivity, and universality. Using the Kohlberg (1960) scale of moral progression, women were viewed as morally deficient because their judgments most often seemed to be reflective of Kohlberg's third and lower stage of development.

The primary connection between women's moral development and their perspective on relationships was not accounted for in Kohlberg's (1968) research. When real life moral dilemmas were presented to women and they were asked to explain their moral thinking and consequent actions, discrepancy was found between Kohlberg's theory and data (Gilligan, 1983). While men tended to value justice, fairness, and objectivity as the primary basis for moral decisionmaking in Kohlberg's study,

the research of Gilligan (1983) has demonstrated that women tend to center on relational systems.

Gilligan's (1983) pioneering research recast the moral domain as being comprised of at least two distinct gender related modes of moral judgment. Women value and demonstrate concern for connections and attachments between people and how one's actions will help or harm other individuals. Women's moral values emphasize caring, nurturing, and mutual responsibility, in contrast to men's which involve an adherence to abstract principles that transcend situational concerns (Gilligan, 1983). Women's elaboration of care considerations "reveals the coherence of a care ethic as a framework for decision and ...women's thinking reveals how concerns about responsiveness and human relationships cohere to form a world view or way of constructing social reality, as well as a problem-solving strategy" (Gilligan et al., 1988, pp. xix-xx).

Because both men and women are capable of moral reasoning in either "voice," voice is better identified by theme, rather than by virtue of gender. Moral voice can be thought of as being sex-related, rather than sex-determined and although each gender usually prefers one mode, some individual men and women use both modes (Gilligan, 1983). For some women whose own growth and development is inhibited due to a confusion with caring for others that impedes a recognition of self, the process of development requires

them to learn to value their own needs and to care for themselves as competently as they care for others (Pearson et al., 1989).

Gilligan's (1983) characterization of female moral considerations posits a compelling hypothesis to promote understanding of a welfare dependent woman's personal construction of morality. Because the welfare system provides only a poverty subsistence, most welfare dependent women are forced to work in the "underground economy" and "lie and cheat" the welfare system by not reporting their wages. This secretive way of living has become a regrettable means of financial survival for many welfare dependent women in their desperate attempt to provide their families with the most basic of necessities (Jencks & Edin, 1990).

Despite this "cheating" among welfare dependent mothers, research has shown that welfare mothers operate on the same moral principles as most other Americans (Jencks & Edin, 1990). They view their first obligation as caring for their children and providing them with the basic material means of existence -- food, shelter, heat, electricity, furniture, and clothes. Since welfare rarely provides recipients who follow the "rules" with enough money to pay for these necessities, the moral notion of women's contextual relativism may explain why welfare dependent women feel entitled to "break" the rules. Welfare checks are not seen as a handout, but as a

legitimate solution to the overwhelmingly irresolvable dilemmas which welfare dependent women confront (Rosen, 1987).

Intensive interviews with a representative sample of 25 welfare dependent families residing in a major Midwestern city, revealed that welfare dependent women believe that by working they should be better off economically. Because the welfare system does not permit them to keep what they earn if they report their earnings, they feel entitled to ignore the wage reporting requirement (Jencks and Edin, 1990). From their research, Jencks and Edin (1990) conclude that "we have created a welfare system whose rules have no moral legitimacy in the recipients' eyes" (p. 32).

An explanation of how welfare dependent women attempt to resolve the overwhelming dilemmas they confront in their daily lives may be implied within the research of Jencks and Edin (1990). Welfare dependent women "do not view themselves as ripping off the system, but rather in many ways as being ripped off by a society who considers them to be throwaways" (Rosen, 1986, p. 108). In order to mitigate the tensions of their condition, they utilize whatever options and resources are available to them.

This moral dilemma of "cheating" the welfare system, faced daily by many welfare dependent women, has undertones of the dilemma women have in responding to Kohlberg's (1976)

famous story about Heinz and his dying wife. When women are asked to resolve the conflict of whether Heinz should steal a drug which he cannot afford to buy in order to save the life of his dying wife, women emphasize the importance of relationships with others and maintain a standard of responsibility and care which underlies their belief that Heinz should steal the drug and break the "rules" (Gilligan, 1982). In accordance with Gilligan's theory of women's moral development and decisionmaking, welfare dependent women who seek avenues which will allow themselves to maintain the ethic of care for their children for whom they are responsible for, can be viewed not as moral transgressors, but as behaving in a manner which is morally consistent with their view of the world. As Gilligan states, "women's sense of integrity appears to be entwined with an ethic of care, so that to see themselves as women is to see themselves in a relationship of connection" (p. 171).

This reiterative relationship of connection and care as a psychosocial and moral theme of women's development is further affirmed from the interviews which Sidel (1986) conducted with welfare dependent women throughout the country. These women spoke about their relationship of connection with their children, their families, and with other women in similar circumstances. This ethic of "sharing and caring" was a central theme of these women's

lives. Despite the pain of being poor in affluent America, studies by Sidel (1986) and Kozol (1988) document women's deep commitment to childrearing, regardless how difficult life might be. Both researchers found that poor women feel that they must reach out to lend women in similar circumstances a helping hand without any specific knowledge of when another person might reach out to them.

Change Theory Related to Women's Development

As discussed previously, much of the research in the area of adult development and change has limited applicability because theories once thought to be gender neutral in their scientific objectivity have been found to reflect an evaluative bias in that the samples studied have been almost exclusively male (Erikson, 1968; Kohlberg, 1969, 1976; Perry, 1970; Vaillant, 1977; Gould, 1978; Levinson, 1978).

Recent research, however, has challenged the male-dominated moral and psychological traditions which have viewed identity formation as a stage process where relationships are subordinated to the ongoing process of individualization and achievement (Gilligan 1977, 1983, 1988, 1989). As new theoretical formulations of the developmental process have evolved, so have the associated concepts of what might promote or impede the developmental process.

Maturity for women has come to be defined differently from that of men and this difference is reflected in emerging models of female adult development (Gilligan 1977, 1983, 1988, 1989). Women's psychosocial development throughout the life span is grounded in the importance of attachment and in a strong identification with issues of interdependence, including the care of others. This fusion of identity and intimacy is reflected in the ordering of priorities throughout women's life cycle (Gilligan 1977, 1983, 1988, 1989; Lyons, 1983). These gender-related differences of female identity development underscore the significance of relationships in women's conceptions of self and morality and reflect a system of meaning-making which has broadened the definition of moral development and focused on the importance of attachment and relationship for healthy psychological development.

According to the structural-developmental theorists, development in the cognitive sense occurs when individuals are unable to resolve important contradictions which occur in their lives to their satisfaction (Piaget, 1952; Kohlberg, 1969). The resulting disequilibrium challenges their existing modes of thought and provokes the questioning that leads to the creation of more adequate structures for making meaning of one's experience in the world. The evolution of these more adequate structures signifies development from the

structuralist point of view. Each transition to a new level of structure is viewed as bringing about an increased level of equilibrium and transforming the context in which the thinking is embedded (Perry, 1970).

Throughout the life cycle growth and discoveries are recursive. A visual representation of this development process can be represented by a helix with an expanding radius which figuratively presents the examination of and ongoing re-examination of recurrent life themes from a different and broader perspective across the life span (Perry, 1981). For women, the issue of interdependence and interconnectedness is representative of this type of developmental issue which is recursive throughout the female life cycle.

As suggested in the work of Gilligan (1982, 1989) and Belenky and others (1986), listening to women's self-descriptions and studying women's lives in context will result in a fuller understanding of their psychosocial, cognitive, and moral development. The research study which follows uses the qualitative, open-ended interview approach of Gilligan (1982) and Belenky (1986) to further our understanding of the developmental process as it reveals itself out of the life experience of welfare dependent mothers embarking upon the psychosocial and intellectual journey required to move themselves towards self-sustaining, economic self-sufficiency.

Section Three: Adult Learning Environments

Opportunities for welfare dependent mothers to access postsecondary education in order to prepare themselves for self-sustaining, economic self-sufficiency remain severely limited. Until well into the 1900s, even women with financial means confronted restricted educational opportunities and were confined to attending women's colleges. Prior to the mid-1900s, most women in the United States, regardless of their economic situation, remained predominantly uneducated, and often, illiterate (Harris, Silverstein, & Andrews, 1989).

Within the past few decades females have made tremendous gains in postsecondary participation; and although, females currently comprise a majority of students in higher education, access to higher education opportunities remains severely limited for poor women, especially for those who must rely on affordable child care and other essential support services to attend college. Current federal and state public policies do not support significant postsecondary educational opportunities for welfare dependent women, even though studies have demonstrated that welfare dependent mothers who complete a postsecondary educational program achieve real economic gains in the labor force which can lead to self-sustaining, economic self-sufficiency (Allen, 1970; Handler & Hollingsworth, 1971; Coles, 1979b; Gilbert, 1984; Heintz, 1986; Grub et al., 1990; Jencks & Edin, 1990).

For a few short years between 1967 and the mid-1970s through the Work Incentive Program (WIN) sponsored by the United States Department of Labor, the goal of improving the employability of AFDC recipients through education and training become a public policy initiative. Under the Work Incentive Program, the first substantial group of welfare dependent mothers enrolled in higher education. In support of this public policy initiative, federal and state supported student financial aid programs were expanded, increased numbers of postsecondary institutions modified their competitive admissions policies, educational remediation programs were developed to address the needs of individuals who had not academically prepared for college while in high school, and the rapid growth of community colleges provided access to re-entry adult women, including many who were welfare dependent. The federally sponsored Work Incentive Program initially met all college-related expenses for up to four years of postsecondary education and provided welfare dependent women with an incentive of \$30 per month to help defray other related expenses. However, by 1972 due to a changing political climate, this short lived social policy initiative began to erode and the Work Incentive Program became limited to underwriting a one-year maximum educational program for welfare dependent mothers. Under current federal policy initiatives, most welfare dependent mothers who attend college must rely

primarily on regular student aid programs which are often insufficient to meet their educational costs (Coles, 1979b).

Welfare dependent mothers who attempt to undertake a postsecondary educational program are confronted with major obstacles on several levels. They face the major barrier of how to pay for their educational expenses, the difficulties associated with beginning an academic program after many years away from school; and in many cases, they confront the compounding problem of poor academic preparation requisite for success in collegiate level work. These major barriers are exacerbated by the intrapsychic obstacles many adults face about their ability to learn and related fears that aging may have diminished their learning capacity.

Little has been written about welfare dependent mothers who have pursued higher education. Case histories, nor longitudinal studies of the numbers of women receiving Aid to Families with Dependent Children (AFDC) who have completed a collegiate program are not maintained by most state departments of public welfare or by postsecondary institutions. As Coles (1979b) notes, except for occasional anecdotes in the press, little evidence exists about the effect that attending postsecondary institutions has on the lives of welfare dependent women and their families.

As a result of her extensive work in preparing welfare dependent women for economic self-sufficiency through collegiate training, Coles (1979b) found the following program

components of critical importance to maximize the successful outcomes for this population of adult learners: providing remedies to eliminate deficiencies in fundamental academic skills such as reading, writing, and mathematics; improving conceptual thinking abilities; providing tutoring and study skills services; developing the self-confidence necessary to achieve in college coursework; and providing a full range of support services which include academic, financial, career and personal counseling, as well as assistance with child care issues, transportation obstacles, health related concerns, and legal problems.

In her work with predominately welfare dependent women of color, Stein (1982) found a strong connection between basic skills improvements and increased self-esteem among her students. Stein (1982) found that remediating deficits in basic skills is "empowering because it connects learners to the larger world and allows them to see new possibilities for themselves" (p. 1). Competency-based instructional techniques are especially useful for this population because this learning strategy makes it clear to the learner what she needs to learn, why it is valuable, and what she must do to demonstrate she has learned it. Competency-based methods are not only useful as a method which breaks learning into manageable units and provides the learner with a series of small successes to build upon, but this method of instruction also helps the learner overcome residual feelings of

incompetence or incapacity to learn which she may have carried into the learning situation. In her educational interventions, Stein (1982) found that "from bumping so hard so many times against racial and sexual discrimination, against the limits of poverty, no one believes in herself or in her power to do;" and therefore, she purports that the role of adult education programs is to demonstrate to these women that they have the capacity to become accomplished (p. 2).

Competency based instruction allows learners to participate in diagnosing their own needs for learning, formulate their own learning objectives, know what competencies the course is designed to help them develop, as well as evaluate their own learning outcomes (Knowles, 1984). An atmosphere of mutual trust, respect, support, and nurturance are critical components of the competency based approach. The andragogical model developed by Knowles (1984) emphasizes process over content and views the teacher foremost as a facilitator of student learning and only secondarily as a content resource. This educational approach emphasizes the "connected" mode of learning which has been shown to be the preferred mode of learning for women (Belenky et al., 1986).

The education of poor women in the United States and internationally must move beyond the educational authoritarianism of tradition education and embrace a full definition of empowerment for poor women which includes

cognitive, psychological and economic components (Stromquist, 1988). Recognizing that the development of internal authority is an important component of an educational program, Stromquist (1988) proposes participation and "consciousness-raising -- the development of a critical mind of the micro and macro reality of individuals" -- as essential aspects of empowerment (p. 12). Resonating Perry's (1981) emphasis on the importance of prescriptive programs which "invite, challenge, and support" individuals in their cognitive development, Stromquist (1988) asserts that "one cannot teach self-confidence and self-esteem, one must provide the conditions in which they develop" (p. 13). The cognitive component of empowerment centers on women's understanding of their conditions and the forces which create such conditions; the psychological component is the development of feelings which reinforce women's beliefs that they can improve their condition and be successful in their efforts; and the economic component is engagement in a productive activity that will allow women financial independence.

In addition to Stromquist (1988), many of the educators who contribute to the radical literature on the mission of community colleges champion the role of empowerment as a critical aspect of education for the underclass who attend these institutions (Jencks, 1968; Jencks & Riesman, 1968; Karabel, 1972; Zwerling, 1976; Pincus, 1980). Adherents of this viewpoint argue that community colleges, which serve the

majority of this nation's minorities, women, and individuals from lower socioeconomic groups, offer a separate and unequal system of higher education and serve as institutions of social control whose purpose is to "cool out" the aspirations of the lower classes. Proponents of this perspective believe that community colleges should do more to provide their students, many of whom are poor women, with a broad understanding of their place in society and provide them with the tools needed to bring about reform.

In addition to the obstacles of unaffordable and inaccessible child care, lack of financial support, and the stigma of being welfare dependent, AFDC mothers who enter postsecondary institutions face many of the same obstacles confronted by other female adult learners. Welfare dependent mothers often have unrealistic goals due to a lack of knowledge regarding specific occupations; poor self-image and lack of confidence due to insecurities about former school experience; social-familial problems associated with the conflicting demands of the student/parent role; and issues of academic behavior which may be related to rusty study skills or the inability to concentrate (Apps, 1981).

The developmental needs of welfare dependent women are consistent with the goals of higher education as described by Apps (1981). Higher education for adults, according to Apps (1981) is a means to acquire the tools for physical, psychological and social survival which includes job skills,

skills for interpersonal relationships, and skills for coping with daily living; a means to discover a sense of meaning in their lives by presenting adults with alternatives that allow them to benefit from emotional and intellectual discovery; a means to learn how to learn by developing the confidence to learn on their own; and a means to help society provide a more human, social, psychological, and physical environment for its members.

Enablers and Inhibitors to Female Learning

A reconceptualization of our educational institutions is needed in order to better educate women for development (Pearson et al., 1989). Recent research on learning styles, decision-making, and cognitive development (Meyers & Meyers, 1980, Gilligan, 1983; Kolb, 1984) suggests "a compelling need to rethink not only what we teach but how we teach it...for traditional ways of teaching may be geared more to men's preferences and ways of knowing than women's" (Pearson et al., 1989, p. 269). According to Kolb (1984), 59 percent of men prefer to learn by abstracting knowledge from its context; in contrast, 59 percent of women prefer to grasp information in context. However, in traditional educational environments, objectivity and abstraction remain more highly valued over experiential approaches to learning (Pearson et al., 1989).

Other gender-related, yet not gender determined differences, are reported by Meyers and Meyers (1980) who

developed the Meyers-Briggs Typology Index which indicates temperament and preference type. Meyers and Meyers (1980) found that 60 percent of men prefer to make decisions through an analytical, objective process, while 60 percent of women prefer a more contextual and narrative decision-making process. Pearson and others (1989) note, "it is important to remember that the difference in preference noted by both Kolb's and Meyers and Briggs' research are not absolute ...although 60-61 percent of each sex prefer to learn and make decisions like the majority of their own sex, the other 40-41 percent prefer to learn and make decisions like the majority of the other sex" (pp. 269-270). These documented differences in learning styles and decision-making preferences have clear implications for incorporating diverse approaches to learning into educational practice.

Classroom climate remains another major arena in which educational institutions must become more responsive to the needs of the new majority of women students. In the first comprehensive report on classroom climate, Sandler and Hall (1982) reported that the overall impact of the campus environment is "chilly" for women and may be related to negative outcomes on the part of some female students. Based on a review of the literature, as well as on campus and individual reports, this illuminating study identifies over thirty ways in which faculty treat female students differently from male students. The cumulative effect of such behaviors is

found to "damage women's self-confidence, inhibit their learning and classroom participation, and lower their academic and career aspirations" (Sandler, 1987, p. 244). Although some academic institutions have become more aware of such practices; nonetheless, Sandler (1987) states "this remains a major problem across the country" (p. 244).

Behaviors which are detrimental to female learners can be classified into two categories: ways in which female students are singled out and treated differently, and ways in which they are ignored (Sandler, 1987). Some of the most pernicious practices which Sandler (1987) cites are: professors interrupt female students more than male students with interruptions often consisting of unrelated remarks, such as comments on appearance which have the effect of bringing discussion to a halt and thus communicating, at least in part, that what women have to say is not important. Professors tend to make more eye contact with men than with women and call upon male students more frequently, so that women students are less likely to feel recognized and encouraged to participate in class. Professors are more likely to nod and gesture and to pay attention when male students are talking, but when women talk, faculty are less likely to be attentive as demonstrated by their shuffling of papers or looking at their watches. Professors call male students by name more often than female students, as if men had more individual identity than women. Professors ask women questions which require more factual answers, while men are

more likely to be asked higher-order questions, a behavior which subtly communicates the presumption that women are less capable of independent analysis than men. Professors are more likely to respond extensively to men's comments than to women's comments, which provides women with much less reinforcement for intellectual participation (pp. 245-246). Sandler (1987) concludes that a major underlying reason for such devaluation of women on the part of collegiate professors is that "throughout society, what women do tends to be seen as less valuable than what men do" (p. 246).

Other inhibitors within the educational process which are also detrimental to women learners include sexual harassment, which is experienced by 20 to 30 percent of all female students; the relatively small percentage of women on most faculties which translates into female students typically having fewer role models and less opportunity to benefit from mentoring; and the widespread lack of structural support for women's concerns as factors which communicate to female students that "although they have been allowed inside the gates, women are still outsiders in the academic world" (Sandler, 1987, p. 247). In conclusion, when welfare dependent women enter collegiate environments to prepare for careers, they must not only cope with internal barriers which they may bring to the learning situation, but also confront significant external barriers which are imposed by the educational environment.

Based on her data analysis of a wide variety of local, regional and national studies, Cross (1979) classified the obstacles that deter adults from participating in organized learning activities into three categories: situational, dispositional, and institutional barriers. The situational barriers which welfare dependent women share with many other re-entry women are the cost and time required to attend school, as well as the need to adapt to juggling the multiple roles and responsibilities of mother/student/ homemaker. For single female re-entry students who are also mothers, lack of time to devote to children, home, and domestic responsibilities can result in the need to develop a wide range of coping behaviors in order to maintain existing relationships and avoid conflict while still allowing themselves to incorporate their ethic of caring for others (Lewis, 1988). Balancing these multiple roles during this transitional time requires both institutional and personal support which can make the difference between successful completion of a program of study or dropping out. In addition to role conflicts, many welfare dependent women must also confront barriers of class and race, as well as lack of mobility.

Dispositional barriers, as noted by Knox (1977) include the fear of being rejected in unfamiliar settings which is very prevalent among adults, along with feelings of inadequacy regarding the learning situation. In addition, research by

Hafner (1989) based on an analysis of national surveys on freshmen women students from 1966 to 1985, found that "although college women have made great strides in the 1970s and 1980s, their self-concept level has not kept pace with that of men, especially in many subareas of self-concept, such as academic ability, intellectual self-confidence, math ability, and public speaking ability" (pp. 33-38). The education of women in psychosocial development and in leadership and achievement should become a more important role of institutions of higher education (Hafner, 1989).

Institutional barriers which occur within the classroom have already been well-described within the research of Sandler (1987) and Sandler and Hall (1982). Also included in this category, however, are many of the inflexible institutional policies and procedures which are nonresponsive to the needs of adult learners placing them at a distinct disadvantage. This category of barriers includes a wide range of practices such as standardized requirements regarding admission credentials, financial aid limitations for part-time learners, class times and schedules, inflexible course regulations, and the lack of women-centered counseling services. For re-entry women, especially those who are welfare dependent, the lack of accessible, affordable child care facilities is cited as the major institutional barrier (Lewis, 1988). Collegiate programs need to offer more

flexible scheduling in both course offerings and support services, more opportunities for an individualized approach to learning, and commit to mitigating negative faculty attitudes towards female adult learners.

The decade of the 1980s have marked the first time in history when females have become the majority of students enrolled in higher education. Moreover since 1986, women over twenty-five years of age have constituted approximately 24 percent of all postsecondary students (Ferron, 1989). The demographic trend is clear: re-entry women have become an important constituency in higher education. As Cohen (1980) observes, "an institutional commitment to admit a non-traditional clientele thus carries with it institutional responsibilities to serve that clientele" (p. 24).

Successful programs for welfare dependent women, as well as other re-entry women, "start with women's strengths as students ... and readjust the institutional policies to make them flexible enough to give re-entry women a chance to succeed" (O'Barr, 1989, p. 94). Institutions of higher education must conceptualize broadly and focus on the potential of re-entry women and "not be bound by an evaluation of their particular current characteristics nor discriminatory attitudes towards women's achievement in general" (O'Barr, 1989, p. 94). A refreshing new approach to the issue of re-entry women's lack of preparation and lack of comparability to

the younger students who form the majority of their class cohort is offered by O'Barr (1989) who believes that this seemingly lack of fit between person and place should be viewed from a "different angle of vision" suggesting that:

There may be less wrong with the person than the place, and that the problem in making a match between the two should be conceptualized as a problem of "What constitutes a student?" rather than as "We know a student when we see one, now let's work on making this person more student like" (p. 98).

Using this different "angle of vision," educators might begin to view welfare dependent women as new students, rather than as deficient students, and affirm the contributions of all learners to the collective enterprise (O'Barr, 1989).

Practical Nurse Career Preparation

For the purpose of the study which follows, the selection of a practical nursing preparation program as a means to assist welfare dependent women find self-sustaining, economic self-sufficiency was purposeful and intentional, not only from a socioeconomic perspective, but also from a psychosocial and cognitive development perspective.

Entry into the nursing profession has always provided women from modest backgrounds a means to improve their station in life by providing them with the economic rewards

to improve their lives along with the social respectability which a profession represents. For welfare dependent women immobilized by the social inequality imposed by their economic and social status, an opportunity for access into the nursing profession presents a means of "breaking out" of the vicious cycle imposed by class. Studies have shown that "role strain" -- the balancing act of breadwinner/mother/homemaker -- is least severe among women who feel they receive decent wages for the hard work they perform (Rosen, 1988). Earning a reasonable salary makes the trade offs of the "double day, double burden" worth the effort.

In addition to the economic rewards, the caregiver role of nursing is highly consistent with women's psychological and moral development and their construction of social reality. The gender related preference of women to view relationships as connected and interdependent is readily mediated through the activity of nursing care. Women typically value caring for others, demonstrate sensitivity to the needs of others, and view participating in others' development as important to their own development.

Integrating the psychosocial assets which women already possess with the economic rewards of a nursing career are powerful elements to promoting change. The opportunity for simultaneous self-development and service to others, along with the economic rewards a profession provides, are

critical motivators for welfare dependent women attempting to successfully complete the initial rung of the rigorous requirements of a practical nurse preparation program. These early motivators continue to be important to reinforcing aspirations for further career advancement.

From a cognitive development perspective, practical nursing programs with their strong emphasis on a combined didactic and clinical approach are structured to enhance experiential learning opportunities. Practical nursing care skills which have immediate application in the clinical setting reinforce the learner's self-efficacy and provide an important measure of self-confidence.

The design of the Career Access Program in Nursing, upon which this study is based, draws on principles of cognitive development to maximize learning. Within the program's first component welfare dependent mothers enter an eight week, 220 hour Patient Care Assistant Training sequence which provides them with the Massachusetts certifications required for employment both as a nurse aid and a home health aid. This initial skill building step in the practical nursing career ladder provides short term immediate gratification through task mastery, instills a psychosocial sense of competence and confidence required for further study, provides a marketable skill which translates into immediate economic rewards in the workplace, and nurtures a sense of self-esteem, self-efficacy

and an initial sense of mastery. Successful completion of this first step provides a foundation for each of the successive steps in the educational career ladder process, each step being carefully structured to build upon former steps. The concept of challenge combined with support is a guiding principle throughout all aspects of the program.

Although mature students who have assumed the responsibilities of adulthood have increasingly become traditional entrants into practical nursing preparation programs, little exists in the literature which describes the cognitive and psychosocial developmental process which these adults undergo as part of their educational experience. A recent examination of the demographic characteristics, training and education, employment status and subjective perception of work and the profession, among newly graduated registered nurses from associate and baccalaureate degree programs, however, provides strong evidence that welfare dependent women have similar motivations and share some personal characteristics of others who are entering the nursing field. Lerner (1990) surveyed 2,315 recent graduates of registered nursing degree programs who sat for the July 1988 Massachusetts nursing exam and found that the typical new registered nurse graduate was a twenty-seven year old single, White American female. She also found interesting differences between technical nursing graduates and

baccalaureate degree graduates, as well as among racial/ethnic minorities as compared to White graduates. Comparing the associate degree program graduates and the diploma nursing degree graduates who are categorized as technical nurses with the baccalaureate degree graduates being categorized as professional nurses, Lerner (1990) found that technical nurses (ADN) were relatively older, were more likely to have had previous preparation as licensed practical nurses (LPN), were more likely to be currently or formerly married, and were more likely to evaluate a program's requirements when selecting a nursing school program. In addition, when compared to professional nurses, technical nurses were more likely to view money as an incentive in selecting a nursing career -- money being rated important by 83 percent of associate degree nurses, 81.3 percent of diploma nurses and 70.4 percent of baccalaureate degree nurses.

Interesting differences among second career people who enter nursing were also found, in that, they were older (32.6 years), were more open to caring for patients from socioeconomically disadvantaged groups, and were more likely to have gone into nursing because of the potential earnings. Interesting statistically significant differences among racial/ethnic minorities in comparison to White registered nurse graduates were also found. Racial/ethnic minorities

placed more emphasis on the financial aspects of a nursing career and its practicality for them; more Black, Hispanic and Native American registered nurse graduates were from a relatively lower socioeconomic status (according to the indicator father's education), were more willing to care for socioeconomically disadvantaged patients, and were older and more likely to have children under the age of six in the home. Of the Black, Hispanic and Native American group, more were likely to feel unprepared for a job search after graduation (Lerner, 1990).

To make a practical nursing career a reality for welfare dependent mothers, their educational preparation must be broken down into incremental manageable steps which provide a sense of mastery and confidence throughout the process; the curriculum needs to be modified to allow for self-paced, mastery learning; and an adequate amount of academic, financial, and personal support services must be made available throughout the educational process which may take three to four years. In addition, educational programs need to become aware of those factors which advance or inhibit the learning process of adult women to maximize the success rate of mature entrants enrolled in practical nursing programs.

Learning is very much reliant upon memory and adult students often find that holding information in their mind

while engaged in an activity is increasingly difficult as they age and field the mental distractions that come with the additional roles and responsibilities of adulthood.

Recognizing that nurses are frequently required to perform several tasks simultaneously, which may hinder the process of memorizing new knowledge and skills for mature trainees, Jarvis and Gibson (1980) suggest making available procedure and reference books for both practical work and in the teaching environment to help reduce the amount of facts that the mature student is required to memorize. Placing more emphasis on where information can be obtained, rather than upon the ability to recall information that is rarely used, may be a useful strategy to facilitate the learning process of the mature student.

The benefits of self-paced, mastery learning for the mature learner have also been well documented (Bloom, 1968, 1976; Jarvis and Gibson, 1980; Marshall, 1986). Self-pacing is especially applicable to the acquisition of practical skills and because mature students place more emphasis on accuracy than upon speed of performance, they benefit greatly from learning experiences that allow them to determine the time required for mastery (Jarvis & Gibson, 1980).

Science curriculum, which has often been cited as a major barrier for women preparing for technical careers, is

another area in which educational practice needs to become more responsive. Female participants in the Career Access Program in Nursing found that successfully completing chemistry was a major stumbling block in their climb to a practical nursing career. As Harris and others (1989) note "science is characterized as masculine ...and there is a cultural belief that women are less scientifically competent than men" (pp. 294-295). The patriarchal bias of science education is manifested in the choice and definition of scientific problems, the design and interpretation of scientific work, and the authoritative, outline-form lecture style (Harris et al., 1989). Often times stereotypically male qualities such as rationality and objectivity are overemphasized in science education to the exclusion of more stereotypically female qualities such as intuition, empathy, and caring. To mitigate patriarchal practices, science educators need to provide more connected, holistic thought; encourage interaction which fosters learning through cooperation and trust; and explore ways to join feelings, values, and ethics with thinking. As stated by Harris and others (1989) "unfortunately in science rationality has been dichotomized with feeling, empathy, and intuition, which have been excluded as rationality has been sanctified" (p. 300). A "major paradigm shift in the culture from a patriarchal to a more balanced, androgynous way of seeing and being in the

world" will greatly benefit science education and female learners, in particular (Harris et al., 1989, p. 300).

In the qualitative research study which follows, the experiences of a number of welfare dependent women who are at various stages of preparation in their goal to become practical nurses are chronicled. Each woman contributes to our insight about how educational practice can contribute or interfere with learning achievements and successful program outcomes of welfare dependent women. Each of these women offers her own unique perspective on the impact her participation in this educational/training program had on transforming her life.

Section Four: Summary and Integration of Literature Review

This literature review has outlined major areas of relevance for addressing the complex issue of how self-sustaining, economic self-sufficiency might become a reality for increased numbers of welfare dependent women. Many of the widely shared negative assumptions regarding welfare dependency were found to be unsupported when viewed from a social, economic, political, and historical context. In fact, the literature strongly suggests that the vast majority of barriers which welfare dependent women confront in their struggle for self-sustaining, economic self-sufficiency are

rooted in the conditions which all women face in today's society. Welfare dependency is a gender-related, economic condition, as demonstrated by the dramatic rise in the "feminization of poverty," which has been fueled by the perpetuation of occupational segregation in the workplace, the lack of economic value for work performed by women, and the absence of national social policies which support affordable child care and universal health care.

Welfare dependent women, by definition, are primarily husbandless women who have child care responsibilities -- in both a social and economic sense. Without the social and economic supports required to carry out these two incompatible and conflicting roles of full time mother and full time worker, far too few welfare dependent mothers are able to transform their lives to become economically self-sufficient or bring about personal change which is self-sustaining.

Currently, the educational needs of welfare dependent women are not being adequately addressed by government sponsored education and training interventions. Federally sponsored programs which do offer some degree of job related training emphasize short term vocational training leading to low-paying jobs offering little career advancement or mobility. In cases where welfare dependent women have been able to enroll in collegiate training, evidence suggests

that institutions of higher education can greatly improve their teaching practices, learning environments, and institutional supports, not only to become more responsive to the developmental needs of welfare dependent women, but to better educate all women for development.

From a psychosocial, cognitive, and moral development perspective, new and emerging research has yielded broader theoretical formulations for enlarging our understanding of women's development across the life cycle. This new research has changed the lens of developmental observation and provided researchers with alternative templates in which to track the process of change.

Clearly, the fusion of identity and intimacy, and the ethic of nurturance, responsibility and care have been shown to be key concepts in understanding psychosocial issues relevant to women's development. These gender related issues of female development shape the lives of welfare dependent mothers. In addition, the psychosocial issues of domination and subordination are magnified in welfare dependent women's lives due to their relatively diminished position of control, as compared to other more advantaged women. This lack of inner agency may also be reflected in their cognitive development, as Belenky and others (1986) suggest and manifest itself in the metaphor of "silence."

From a moral perspective, welfare dependent women in their roles as mothers confront daily the primary ethic of care issues while trying to eke out a manageable life for themselves and their children under the strain of poverty. These conditions shape the context in which they make their own moral meaning of the world.

In conclusion, extensive evidence exists to document the obstacles which welfare dependent mothers confront in their efforts to become economically self-sufficient. Virtually no documentation exists, however, to provide educators and social policymakers with an informed understanding of the transformation process experienced by welfare dependent women who are successful in this process. The research study which follows seeks to enlarge our understanding of the process of development experienced by successful welfare dependent mothers. The applications of this study can increase our appreciation of the process of development for all women and contribute to more effective educational designs and program delivery interventions which promote self-sustaining, economic self-sufficiency among welfare dependent mothers.

In the chapter which follows is a description of the grounded theory methods which were used to generate the concepts central to understanding the study participants' cognitive and psychosocial changes as they entered and

successfully completed each program component and subsequently became economically self-sufficient.

C H A P T E R I I I

METHODOLOGY

Introduction

The research method used for this study was grounded theory generation. This qualitative method of research is characterized by its holistic, inductive, and naturalistic qualities. To appreciate the theory which emerges from this process, basic assumptions which underlie this method of inquiry must be understood. Therefore, the first section of this chapter explains in detail the research method of grounded theory. In Section Two of this chapter, the study participants and selection process are described. And in Section Three, a chronology and a description of the interview process are provided.

Section One: Grounded Theory Method

A qualitative, cross-sectional research design was selected for this study in order to develop substantive theory related to the developmental process experienced by welfare dependent women who were enrolled in a structured collegiate level educational program aimed at providing them with the requisite education and skills necessary to become employed as practical nurses and as a result become economically self-sufficient. Through the use of grounded

theory methodology the researcher was able to generate a theoretical "process model of change" which accounts for the developmental process experienced by welfare dependent women who attain self-sustaining, economic self-sufficiency as a result of successfully completing a structured collegiate level education program and becoming employed as practical nurses.

Grounded theory research is a structured process of discovery which allows the important dimensions of the research to emerge from analysis of the cases under study without predicting in advance what the critical dimensions or existing patterns of mutual shaping will be (Patton, 1980, p. 22). The instrument of choice for naturalistic inquiry is the human whose unique qualities include: responsiveness, adaptability, holistic emphasis, ability to function simultaneously in the domains of propositional and tacit knowledge; as well as, the ability to generate, test, and clarify hypotheses with immediacy (Lincoln & Guba, 1985, pp. 193-194). Much of the original groundwork for this inductive, phenomenological method for generating new theoretical concepts and hypotheses from data systematically obtained and analyzed in social research is credited to Glaser and Strauss (1967).

The research design which is based upon the grounded theory method unfolds from the interaction between the inquirer and the participant. Once in the field, the

researcher builds upon her tacit knowledge and uses techniques of in-depth interviewing, observations, and document analysis.

The grounded method of inquiry is based upon successive iterations of four elements: purposeful sampling, inductive analysis of the data obtained from the sampling, development of grounded theory based on the inductive analysis, and projection of next steps in a constantly emergent design (Lincoln & Guba, 1985, pp. 187-189). This process of data collection and analysis is ongoing and recurrent with the data shaping the emerging theory as it becomes more focused. The development of the theory continually influences the direction of the data collection until after a series of ever closer approximations the salient elements begin to emerge and one discovers what is happening in the context of the research.

Once one has made sense of the field data, redundancy achieved, and the theory grounded in the data obtained is stabilized, the verification of what one has discovered begins. "Discovery and verification mean moving back and forth between induction and deduction, between experience and reflection on experience, and between greater and lesser degrees of naturalistic inquiry" (Patton, 1980, p. 47).

The grounded theory method is indicated for use in this research study for a number of reasons. First, no a priori

theory could possibly encompass the complex and multiple constructed realities which comprise the lives of the program participants who are encountered in this study. Grounded theory affirms that human experience, judgment, and insight are inextricably enmeshed and explicitly recognizes the concept of "mutual shaping."

Second, the mutual shaping influences which comprise the context of this study may be explicable only in terms of the interactive environment in which the program participants are immersed. Rather than a linear causality of cause and effect, grounded theory embraces the notion of "mutual causality" -- that is that "systems and organisms evolve and change together in such a way (with feedback and feedforward) as to make the distinction between cause and effect meaningless" (Lincoln & Guba, 1985, p. 56).

Third, grounded theory has proven to be particularly well suited for understanding human phenomena, particularly in areas which are relatively uncharted. Lincoln and Guba (1985) assert that when the entities being studied are human beings and the central purpose of the research is understanding rather than prediction, then the grounded theory method of research is the most reasonable method to use. Lincoln and Guba (1985) believe that the positivist tradition of hypothetico-deductive research with human respondents ignores their humanness, "a fact that has not only ethical, but also validity implications" (p. 27).

Population of the Study

The population of concern for this study share the following characteristics: 1) all are mothers who have been dependent on public welfare as their primary means of economic support prior to entering a practical nurse preparation program; 2) all have made the decision to enroll in a community college educational/training program designed to provide them with the academic, technical and support services required for their successful entry into practical nursing careers; and 3) all are re-entry, nontraditional adult learners who are both economically and educationally disadvantaged.

Human Subjects Review Procedures

The method of theoretical sampling among participants in the Career Access Program in Nursing raised issues around confidentiality. To address such issues the researcher incorporated the following procedures into the sampling process. During the initial meeting with potential research participants, the researcher addressed confidentiality concerns by carefully explaining to potential study participants the purpose and goals of the study, the reasons the researcher had selected particular women for potential participation, and the specific format and time commitment which would be required of selected study participants.

Prior to formulating a decision regarding their future participation in the study, potential participants were encouraged to ask questions about the research and discuss any concerns regarding their potential participation. Potential participants were assured that their involvement in the research study would in no way affect their participation in the Career Access Program in Nursing. In addition, all study participants were assured that any interview content resulting from their potential participation would remain confidential and that their anonymity would be protected in the final research study.

Data Collection Procedures

For the purposes of this research a "unit of analysis" was a program participant. Therefore, the primary focus of data collection was in-depth interviewing of participants in their naturalistic setting -- home, school, and work environments -- to discover how individuals were changed by their experience as program participants. Interviewing, observing and interacting with program participants in their naturalistic settings maximized opportunities to gather contextual data and use of participant observation methods. Each program participant played an active role in assisting the researcher to interpret the emerging data which were based upon their own construction of reality.

Naturalistic inquiry relies upon "purposeful sampling" (Patton, 1980) or "theoretical sampling" (Glazer, 1967), rather than random or representative sampling, to increase the range of data exposed and to uncover the full array of multiple realities which exist among human beings. Patton (1980) also describes purposeful sampling as best used as a strategy when the researcher wants to come to understand certain select cases without needing to generalize to all such cases. Purposeful sampling maximizes the researcher's ability to develop grounded theory that takes "adequate account of local conditions, local mutual shapings, and local values" (Lincoln & Guba, 1985, p. 40).

Using this approach to sampling the researcher jointly collects, codes, and analyzes the data, and based on the emergent theory, decides what data to collect next. This approach assures that the process of data collection remains controlled by the emerging theory which Glazer (1967) considers essential to the process.

The selection of "critical case sampling," a particular type of purposeful sampling, is used to permit maximum application of the information gathered to other cases. The critical case sampling used in this study included in-depth interviews with eight program participants, two individuals from each of the four discrete components of the Career Access Program in Nursing. These four hierarchical components represent discrete programmatic transitional

points and are as follows: 1) Patient Care Assistant Training Component (welfare dependency); 2) Developmental and Academic Coursework Component; 3) Licensed Practical Nurse Training Component; and, 4) Employment as a Practical Nurse Component (self-sustaining, economic self-sufficiency). Four pairs of study participants, two from each of the four discrete program components, were representative of a particular participant cohort and provided data for a cross-sectional analysis of the change process experienced by individuals from each of the four specific program components. Following the participants of this study over a twelve month period provided for "thick description" and a longitudinal analysis of the change process of participants as they entered and subsequently completed various program components.

Naturalistic Observation

This research was carried out in the natural setting in which the program participants were immersed. As Lincoln and Guba (1985) suggest "realities are wholes that cannot be understood in isolation from their contexts, nor can they be fragmented for separate study of the parts" (p. 39). An axiom of naturalistic inquiry is that the whole is more than the sum of the parts; that the very act of observation influences what is seen; and that the context is crucial in deciding whether or not a finding may have meaning in some other context as well (Lincoln & Guba, p. 39).

Participant Observation

The researcher maintained the role of "participant observer" throughout the twelve month period of the study in order to facilitate the development of an "insider's" view of what elements comprised the change process which participants were experiencing during each distinct stage of the program. Through the role of participant observer the researcher was able to "simultaneously combine document analysis, interviewing of respondents and informants, direct participation and observation, and introspection" (Denzin, 1978, p. 183).

The researcher became sufficiently a part of the situation which the program participant was experiencing in order to understand personally what was happening in terms of the change process for each participant in the study. Patton (1980) describes the participant observer role of the researcher as a formidable challenge which combines participation and observation to allow the researcher to become capable of understanding what is going on as an insider while describing the process for outsiders.

Researcher's Role and Orientation

Qualitative methodology emphasizes the importance of being factual about observations rather than being distant from the phenomenon being studied. Researchers who undertake this phenomenological method must be seen as caring, interested, and responsive; impartial, rather than simply

objective; and as someone who has not previously decided in favor of one position over another (Patton, 1988).

The researcher's role in this study in terms of her relationship to the day-to-day operation of the Career Access Program in Nursing was twice removed in that a full time project manager was responsible for daily program operations and a client services coordinator was responsible for the delivery of counseling and other support services. The researcher was responsible for supervising the project manager, overseeing on-going program development to increase program effectiveness, and seeking continued grant funding to assure the future of the program. Formative and summative evaluations were conducted by the program's external funding agency.

Aside from the program participants who agreed to participate in the research study, the researcher had no direct contact with the participants who were enrolled in the Career Access Program in Nursing. The researcher's primary role and orientation in carrying out this study was to gain a better understanding of how community college academic and career related training programs can better educate welfare dependent women for self-sustaining, economic self-sufficiency.

Interviewing Techniques

Prior to conducting the interviews a general interview guide was developed to frame the set of issues that would be

explored with each participant. The guide was used as a basic checklist during the interview to ensure that all relevant topics were covered. However, depending on the information which emerged from the conversation at hand, the researcher exercised maximum flexibility to pursue information that might potentially be of importance. Patton (1980) emphasizes that the fundamental principle of qualitative interviewing is to provide a framework within which respondents can express their own understandings in their own terms (p. 205).

Reference Group

Two successful participants who had completed the Career Access Program in Nursing, had become employed as practical nurses, and had become independent of public welfare for economic support, served as a reference group for the study. The researcher explained to the reference group participants' that the information which they shared would help the researcher to better understand the transformation process experienced by welfare dependent women who entered community college career preparation programs. This reference group assisted the researcher to better comprehend the nature of the changes experienced by successful program completers and how each of the various stages of the Career Access Program in Nursing contributed to the transformation to economic self-sufficiency. Both of these successful

program participants were interviewed in-depth in order to reflect upon the cognitive and psychosocial changes which they experienced in their transition from welfare dependency to self-sustaining, economic self-sufficiency.

Through reflection about their own experiences, these two successful program participants assisted the researcher to refine and ground the salient questions for the general interview guide which served as the focal point for data collection with the other women who participated in the study. In addition, this reference group aided the researcher to determine whether any existing measurement instruments might be appropriately utilized to measure the change process experienced by other successful program participants, what the enablers and inhibitors to successful participant outcomes might be, what the role of significant others might play, and how program participants might define their own personal transition points during their program participation. The reference group helped guide the researcher in the process of theory generation.

Data Analysis Procedures

An inductive approach to data analysis was used. The researcher recorded and transcribed all of the in-depth, open ended interviews conducted with the eight study participants. The resulting 112 single spaced pages of interview data were analyzed, classified, and coded into systematic categories of

inquiry and organized on a matrix. The process of data analysis consisted of labeling the various kinds of case data into a classification scheme and establishing a data index. The use of a data index facilitated organizing the case data into patterns, categories, and basic descriptive units in order to search for patterns and themes. The case data were analyzed to prepare a case record which was used to construct the thick description case study. The case study comprised a descriptive, analytic, interpretative, and evaluative treatment of the comprehensive descriptive data contained in the case record (Patton, 1985, pp. 300-306).

The interpretation of the data involved attaching meaning and significance to the analysis, explaining descriptive patterns, and looking for relationships and linkages among descriptive elements. Patton (1980) describes this process as an "ongoing challenge, paradox, and dilemma" in that the researcher "must constantly move back and forth between the phenomenon" of the participant and the researcher's abstraction of that experience, "between descriptions of what has occurred" and the researcher's analysis of these descriptions, "between the complexity of reality" and the researcher's "simplification of those complexities, between the circularities and interdependencies of human activity" and the researcher's inclination to look for "linear, ordered statements of cause and effect" (Patton, p. 325).

Using this structured inductive process of contextual analysis, each category of response was carefully examined and evaluated. The researcher looked to discover critical dimensions which had been identified as important to the study's original theoretical framework, investigate those assumptions which had germinated from the literature review process for relevance, and develop new conceptual constructs which emerged from the findings and had not previously been considered.

The evaluation of the data involved making judgments about and assigning value to the data which had been analyzed and interpreted. As Patton (1980) clearly emphasizes, "the cardinal principle of qualitative analysis is that causal relationships and theoretical statements be clearly emergent from and grounded in the phenomena studied" (p. 278).

Trustworthiness Criteria

The following techniques were used to improve the trustworthiness of the interpretations and findings of the study: prolonged engagement, persistent observation, and triangulation. The researcher invested extensive time within the naturalistic setting over a twelve month period to ensure prolonged engagement in order to learn the culture, test for misinformation introduced by distortions either of the self or of the respondents, and to build trust. Persistent observation was carried out over the twelve month

period to identify and provide focus and detail about the salient characteristics and elements of the change process which were most relevant.

Triangulation of data sources was used to contribute to the verification and validation of the qualitative analysis. Each hypothesis was examined for reliability and consistency within the context of the study participants' experiences. As a hypothesis was accepted it was cross validated and verified through a process of the researcher becoming re-embedded in the data, through relistening to the spoken reflections on the tape recordings, by reviewing relevant literature, through discussing emerging findings with experts, and by conducting informal follow up conversations with study participants. During this research process a secondary literature review was conducted to clarify new emerging theoretical formulations and to provide the researcher with additional insight of the phenomenon under study.

Cross-validation of multiple sources was assured by utilizing various kinds of data including observations, interviews, and program records. To assure confirmability of emergent patterns, interviews were conducted with individuals known to the study participants such as significant others, classroom instructors, and nursing site supervisors. Information obtained through the interviews was further validated by corroboration with existing written evidence

such as program documents, course grades, and clinical supervisor evaluations. The longitudinal aspect of this research and the use of a reference group to verify emerging theory provided a means to check for reliability and consistency over time regarding the change process which participants experienced and reported.

Section Two: Description of the Study Participants

Through the use of a purposeful sampling approach (Patton, 1980), the participants of this study were identified out of a pool of 104 economically and/or educationally disadvantaged students who had enrolled in the Career Access Program in Nursing over the past three years.

During Step One of the identification process, program files were examined to identify potential study participants who met the following select criteria: female; dependent on welfare as a means of economic support upon program entry; successful completion of the Patient Care Assistant Training Program which is the first component of the Career Access Program in Nursing; and the desire to remain in the Career Access Program in Nursing in order to complete the educational preparation required to become a practical nurse.

During Step Two of the identification process those student files which met the selection criteria of Step One were categorized into the four discrete hierarchical

components which comprise the Career Access Program in Nursing: Patient Care Assistant Component (welfare dependency), Developmental and Academic Component, Licensed Practical Nurse Training Component, and Employment as a Practical Nurse (self-sustaining economic self-sufficiency). This cross-sectional categorization of students by program component enabled the researcher to interview program participants from each of the four hierarchical stages of the program in order to observe the developmental process of successful individuals from a longitudinal perspective.

During Step Three of the selection process student applications from each of the four program components were reviewed. To insure that the study participants would be representative of the diversity of welfare dependent women in the general population, the following considerations guided this stage of the selection process: women of color were included, women whose ages spanned the life cycle were included, and women who were successful in moving through the various components of the program in order to reach their goal of becoming a practical nurse were included. In addition, women whose marital status was representative of the divorced, separated, and never married categories were included. All of the selected participants were mothers who had children residing at home with them. Based on these criteria, two potential study participants from each of the four program components were selected for possible

participation in the study. An additional four study participants, one from each program component, were selected to serve as study participant alternatives in the event that one or more of the selected individuals chose not to participate in the study.

During Step Four of the participant selection process, two women who had successfully completed all four hierarchical components of the Career Access Program in Nursing and were currently working as practical nurses were selected to serve as a reference group for the study. This reference group was selected to assist the researcher better understand the transformation process experienced by the welfare dependent study participants as they became immersed in the educational preparation process required to move themselves towards economic self-sufficiency. In addition, this reference group assisted the researcher to better develop the general interview guide.

Section Three: Chronology and Description of Study Participant Interviews

All of the eight participants in this study took part in at least one in-depth interviewing session with the researcher during a twelve month period. Some participants were interviewed a second time during the data analysis portion of the study in order to illuminate some of the emerging findings.

Two of the study participants who comprised the Employment as a Practical Nurse cohort served as a reference group for the study and were interviewed first. This reference group provided valuable data which helped to shape the general interview guide and broaden the researcher's understanding of the population.

Introductory Contacts

An Introductory Letter to Potential Study Participants was mailed to each of the eight potential study participants (Appendix A). The letter introduced the researcher, described the purpose of the study, and requested permission to telephone the woman to describe the study in greater detail and discuss her interest in participation.

The researcher made an initial follow-up telephone call to each of these women. During this initial conversation, the purpose of the study was explained, preliminary questions of the potential study participant were answered, and a convenient time in which the potential study participant could meet with the researcher was scheduled. All of the original eight women who were selected for the study agreed to participate. Some participants required rescheduling of their initial interview appointments due to unforeseen circumstances which prevented them from keeping their original appointment date.

The Interview Process

An initial interview was conducted with each of the study participants using the general interview guide as a framework for the discussion (Appendix D). The general interview guide provided a systematic method of interacting with the diverse study participants and helped to delimit the issues which were discussed during the course of the interview. At the beginning of each interview the purpose of the study was reviewed, questions regarding the study were answered, permission to tape record the interview was requested, and the informed consent forms were signed (Appendices B & C). These initial interviews generally lasted from one to two hours in length and were conducted at a location which was convenient to the study participants. A follow-up interview was conducted with some of the study participants in order to elucidate emergent themes and clarify areas of ambiguity.

A case analysis approach was used to collect, organize, and analyze the qualitative data. This comprehensive and systematic method of analysis allowed for an in-depth study of each study participant through the use of the case record.

Data Interpretation and Analysis

Based on a case analysis of the case records of the two study participants who comprised the reference group, the researcher developed a preliminary classification matrix as a method of capturing the basic descriptive units which

appeared relevant to understanding the developmental process experienced by the study participants. The classification matrix captured demographic, socioeconomic and historical data, experience and behavior data, and opinion and value data.

After transcribing each subsequent interview, the researcher classified the raw data, that is the actual quotations spoken by the interviewees, on the matrix scheme as a first step of content analysis. The researcher looked for emergent patterns and relationships among the descriptive units as new qualitative data were added to the matrix. The matrix scheme was enlarged during the course of the study as new categories of data emerged from subsequent interviews.

Inductive Analysis

Using the basic descriptive units which emerged as significant on the matrix, the data were analyzed by organizing the data into patterns, categories, and themes. The researcher looked for relationships and linkages among the descriptive elements and examined particular situations to discover whether causal data might be applicable to other situations.

Validation and Verification

In order to verify and validate the emerging data, the researcher conducted additional less formal interviews with individuals who had a relationship with the study

participants such as instructors, the CAP director, the CAP client services coordinator, and clinical supervisors. This method of cross-checking with other individuals helped the researcher scrutinize her emerging perspective, examine alternative explanations for the emerging theory, and discover inconsistencies. This process of triangulation was continued until the researcher believed that the weight of the evidence and the best fit between the data and analysis had emerged.

Summary

This chapter included a description of the grounded theory method and a rationale for its use for the purpose of this study. The qualitative methods which were used for the process of data collection and analysis were discussed. In addition, the research population of this study and the selection process for study participants were described along with the reference group which was used to ground and focus the general interview guide. A chronology and description of the interview process was provided along with a description of the process for data interpretation, data analysis, and data validation and verification.

C H A P T E R I V

FINDINGS

Introduction

This chapter is divided into four major sections. The first section provides an examination of the nondevelopmental findings which emerged from the data analysis. Discussion of these data findings includes a demographic overview of the study participants' backgrounds, their prior educational experiences, workforce attachment and related work disincentives, role strain conflicts associated with single parenting, the psychosocial reality of welfare dependent women, and gender related issues of affiliation and interconnectedness. These thematic areas of inquiry are related to topical sections of the literature review and provide an enriched context for better understanding the developmental findings of this research study. The data findings presented in this section are reinforced by the personal "voices" of each of the study participants.

The second section provides a comprehensive analysis of the internal process of psychosocial and cognitive change experienced by the welfare dependent mothers who participated in the Career Access Program in Nursing. Interrelated gender issues specific to female identity development are analyzed in order to ground our theoretical

assumptions and crystalize our understanding of their subsequent impact on women's welfare dependency. In addition, the potency of gender, class, and socioeconomic status on developmental issues related to female dependency and empowerment are examined. This second section concludes with an exploration of the transformation process of the study participants from a longitudinal hierarchical programmatic perspective and draws upon the "voices" of the study participants to portray the salient developmental issues related to each of the four Career Access in Nursing program components.

The third section of this chapter presents a four stage "process model of change" which emerged out of a distillation of the study's data findings and is clearly one of the most important outcomes of this research study. Each of the "invariant, domain specific stages" of this four stage model of change are described in detail. This "process model of change" provides a template for promoting self-sustaining, economic independence among welfare dependent mothers who enroll in collegiate level career training programs. In addition, this "change model" serves as an effective construct for developing intervention strategies aimed at reducing welfare dependency through education and empowerment, as well as for evaluating the effectiveness of intervention programs proposed to promote long term, economic self-sufficiency among welfare dependent women.

In the fourth and final section of this chapter, the major study findings are summarized and the interrelationship of these findings with "women's reality" is discussed.

Section One: Analysis of Nondevelopmental Findings

The primary inquiry of this study was to examine the internal process of developmental change experienced by the study participants; however, many other interrelated nondevelopmental themes which emerged from the case analysis are worthy to note. A clear understanding of these nondevelopmental findings which are of a demographic, situational, and contextual nature will increase our appreciation of the dramatic and complex internal dynamics involved in the process of moving from welfare dependency to self-sustaining, economic self-sufficiency.

Demographic Influences on Study Participants

All the participants of this study reside in Bristol County, one of the most historically impoverished counties in the state of Massachusetts. The two largest cities in the county are characterized by having the state's lowest high school graduation rate for adults -- with only one in four adults twenty-five years of age and older having attained a high school diploma. The two largest cities in the county have traditionally had the highest unemployment rates in the state. The per capita household income in the

area is among the lowest in the state with the income of 14 percent of families falling below the poverty level.

Residing in the county is a very high incidence of immigrants and non-native speakers. The predominant ethnic group in the area is Portuguese whose traditional family, religious and social values permeate the culture and reinforce women's subservient position to men. In addition, the area ranks among the state's highest in terms of teen pregnancy and welfare dependency with growing numbers of young women leaving school prior to high school graduation in order to care for their young children (Spinner, 1989).

This county's primary economic reliance on the once powerful textile manufacturing and fishing industry combined with its significant lack of a professional or skilled economy, has served historically as a disincentive for area residents to perceive formal education as a means to provide for their own economic futures. The cultural values of the area supported youngsters leaving high school at an early age to begin their work lives in the once numerous factories where their parents were most probably employed. Very few private higher educational institutions or proprietary schools serve this geographic region; and therefore, individuals who do attend college rely heavily upon the public system of higher education. The community college which serves this disadvantaged geographic area was the

initial point of access for the welfare dependent mothers who participated in this study.

From a cumulative three year pool of 104 program participants who were enrolled in the community college sponsored Career Access Program in Nursing (CAP), eight welfare dependent mothers were selected as study participants. This particular sample of welfare dependent women was purposefully chosen to maximize heterogeneity in age, marital status, educational background, family size, and race. This sampling approach provided the researcher with a wide lens in which to view welfare dependency and to study the participants' transformation process from a broad based perspective. Juxtaposing the variance in the study participants' backgrounds with their collective experience of welfare dependency allowed the researcher a beneficial vantage point from which to distill the data and recognize emergent themes.

A composite profile of the study participants is provided in Table 4. Included for each of the eight study participants is marital status, number and ages of children, years of schooling, reason for leaving school, and number of years of welfare dependency. In addition, each study participant is depicted in the specific component of the Career Access Program in Nursing in which they were enrolled at the time of their initial interview.

Table 4

Composite Profile of Study Participants

	Kathy	Janet	Angela	Lisa	Nat	Rose	Debra	Bev
Program Component	PCA	PCA	Acad/ Devel	Acad/ Devel	LPN School	LPN School	Empl LPN	Empl LPN
Age	25	36	33	31	25	30	35	49
Marital Status	Sgle	Sep	Div	Div	Sgle	Sgle	Div	Div
No. of Children	2	4	3	3	1	2	2	3
Ages of Children	3,7	17,15 13,10	4,10 11	2,8 10	5	1,3	14,18	18,24 28
Years of School	11	11	12	12	12	9	11	8
Reason Left School	preg	fail	grad	grad	grad	fail	marry	marry
Yrs. on Welfare	7	2	3	2	3	3	10	10

The age of the study participants ranged from twenty-five years of age to forty-nine years with a median age of thirty-three years. Table 5 provides an age distribution of the study participants.

Table 5
Age of Study Participants

Age	25-29	30-34	35-39	40-45	46-50
No. of Women	2	3	2	0	1

Three of the women were never married, four were divorced, and one was separated. Table 6 details the marital status of the study participants.

Table 6
Marital Status of Study Participants

Marital Status	Never Married	Separated	Divorced
No. of Women	3	1	4

The length of time which this group of women maintained some level of welfare support spanned from two years to ten years with an average of five years. All of the study participants became welfare dependent due to insufficient financial support from the father of their child(ren) in concert with their own inability to earn a family wage.

Table 7 details the number of years which the study participants were welfare dependent.

Table 7
Number of Years of Welfare Dependency

Yrs on Welfare	1-2	3-4	5-6	7-8	9-10
No. of Women	3	2	0	1	2

Two of the women had one child each, two women had two children, three women had three children, and one woman had four children. The median number of children of this group of mothers is 2.1 children. In Table 8 the number of children of the study participants is presented. The ages of these women's dependent children ranged from eighteen months to eighteen years old.

Table 8
Number of Children of Study Participants

No. of Children	1	2	3	4
No. of Children Per Woman	1	3	3	1

Prior Educational Experiences

Study participants demonstrated wide variance and diverse attitudes regarding their prior schooling experiences. Three of the women had graduated from high school, one left in her senior year to marry, two left in the eleventh grade (one due to pregnancy), one left in the ninth grade, and one left in the eighth grade. Number of years of formal schooling, however, was not an accurate predictor of future academic performance or need for prescriptive developmental coursework. Table 9 provides a distribution of the study participants years of schooling.

Table 9
Years of Formal Schooling

Year of Termination	8th	9th	10th	11th	12th	diploma
No. of Women	1	1	0	2	1	3

The five women who dropped out of school prior to graduation left primarily due to a combination of failing grades, marriage, pregnancy or the divorce of parents. Having no clear career ambitions or love of learning, this group of women described their prior schooling in negative terms and voiced frustration about their former authoritarian school environments. Janet who left school in the eleventh

grade due to failing grades exemplifies this negative type of prior learning experience.

I hated school. I was one of those that went because I had to. I either went to school or I got punished. If I liked the class and I liked the teacher and I was interested and the teacher was interesting, then I whizzed right through it. But if it doesn't interest me, I just totally loose it, no matter what I do.

Now, thirty six years of age and in the process of completing the first component of the program, the Patient Care Assistant training, Janet contrasts her former educational experiences with her current learning environment.

This program is something that I'm interested in, that I like. The instructors are great, they're not really dry or totally to the book. I mean you can laugh with them, you can joke; they put everybody right at ease. In high school, it's I'm god, and you're just the little peons. With the instructors in this course, you were equals.

Also having encountered a negative school experience is Rose who left school at the end of the ninth grade.

When I was in high school, I would have to say I was like a problem child. I was terrible, oh my god. I think I was rebellious because my mother and father had split up at the time. And, no matter what anyone told me, you know, when you're a kid, it's like how do you know? You have an attitude, I had an attitude. So I didn't do very well in school. I wasn't interested in it. I guess I left when I was about 15, almost 16. I just didn't want anything to do with it. I didn't want anyone to control me. I wanted to control myself. I was wild, you know. I just guess it took me a while.

When asked to compare her former learning situations with her current learning experience in the Career Access Program in Nursing, Rose replied:

When I came to the CAP program, I was surprised that I was doing as well as I was. I hadn't done that well before. But then I wasn't, because I know now what I'm capable of doing. I know that if I'm really interested in something, that if I put my effort into that, I'm going to do well. You know, so it all depends on me. So whatever my grades are reflects me, what I'm doing at that time.

Workforce Attachment and Related Disincentives

Although the educational experience of these women demonstrated considerable range, their work histories held some notable similarities. All of them had extensive work experience: six had worked in low paying, menial jobs such as factory worker, store clerk, waitress and cleaning woman. Two of the women held jobs with more extensive responsibility and better pay: one woman held a career clerical position within the Armed Services, but after eight years was forced to terminate her position as a result of a sexual assault by her superior while at work. Another woman had operated a successful small car repair business for two years with the father of her young child. Virtually all of the women had some experience working in the underground economy in order to provide the basic necessities for their families. Such jobs included cranberry picker, house cleaner, babysitter, and private home care attendant.

None of the women had been raised in a family which had been dependent on welfare for financial support; although, two of the women's mothers at the time of their divorce had sought welfare assistance, but had been declared ineligible. These two particular study participants angrily recalled their mothers' struggle of working two and three jobs to support themselves and their siblings. As Rose relates:

When my father left, my mother worked three jobs. My mother went to AFDC for help and all they gave her was \$2.50 a month for food stamps. She walked in the office, she took the food stamps, she tore them up and she threw them at the director of the program and she said, you know what you can do with this \$2.50? You see that cigar you're smoking, go out and buy yourself another one, 'cause I know that it cost more than that, and she walked out. I mean the woman is working three jobs to try to get by, and they're going to give her \$2.50 for food stamps. I mean, why even bother.

The six other women came from two parent families and all but one had a mother who worked outside the home while they were growing up. Three of the study participants' mothers had worked in the health care field: two were licensed practical nurses and one was a certified nurse aid. One woman had a godmother who was a registered nurse.

The pattern of these women's welfare dependency is quite typical of that reported nationally. Women with children of preschool age felt a keen sense of duty to remain at home to care for their infants and toddlers. These real-life role conflicts constrained the study participants from venturing forward towards becoming self-supporting and dampened their

ambitions for pursuing self-development goals. Combined with these women's internal barriers for seeking self-sufficiency were real external barriers which included lack of reliable transportation and the inaccessibility and unaffordability of child care services.

Study participants with three or four children who after their divorce tried to work in order to avoid welfare dependency found that their efforts resulted in jeopardizing their health and their family's welfare. When their paid employment made them ineligible for cash welfare payments, these mothers were forced to choose between working more than one job in order to adequately support their families or terminating their employment to avoid jeopardizing their children's welfare. Combining work and some form of non-cash welfare support such as food stamps, health care, or a housing subsidy was common. Janet who is divorced and raising four teenagers exemplifies this struggle.

I worked in a state hospital for the retarded for 13 years. I started when my third child was three months old. I was working three jobs at one point to stay off welfare. I worked at the hospital from eleven at night to seven in the morning. I came home, got my little one off and set, then I was back out of the house doing cleaning in restaurants from nine in the morning to one in the afternoon. I came home after one, I laid down 'til 2:30, I got up, I got supper started very quickly, so I could be at work at the nursing home from four to nine at night. I did it for a year and a half and it was just too much. I got sick. I had to go back to just one job. I'm not a lazy person. I don't mind working my butt off, as long as

I have a little extra so when the kids ask me for a buck, I got a buck to give them.

Kathy, a twenty-five year old mother of two children ages three and seven, had sought work and was offered a position in a health care setting. Although she was looking forward to satisfying her own desires for self-fulfillment outside the home, when she and her mother sat down and figured out how her working would cause her children diminished financial stability, Kathy, along with her mother's support, refused the position.

I would have been making less than I would have been getting on welfare. And to me, I don't want to go out and do that and jeopardize my kids, because they need everything they have and more. I don't want to be the one to go out and be selfish enough to go out and do what I want to do, and then end up with my kids not having the things that they should have. The only thing that I'm worried about is my children, that once I get on my feet and go, I don't want to jeopardize them and I want to make sure I have the benefits, you know, the medical. I don't want to fall behind, or end up worse. If anything, I want to go forward, not backward.

Psychosocial Reality of Welfare Dependent Women

Prior to returning to school to train for a nursing career, these women had little sense of self outside of their roles as mothers and homemakers -- motherhood was the primary context which dominated their lives and their decisionmaking. Some, in fact, carried unplanned pregnancies to term because they viewed their futures as very limited, especially in terms of educational aspirations or career satisfactions.

Mothering was an area of competence in which they excelled and received personal reward and satisfaction. All of the mothers of this study verbalized a profound responsibility to provide for their children's emotional, financial, and social needs despite their limited resources. In fact, no woman expressed any regret for going forward with her decision to bear her child(ren), whether she had four children or just one child. The voice of one woman with four children exemplifies this role responsibility: "My kids weren't asked to be born; I brought them into the world and they're my responsibility." Expressions of love and pride for their children were common.

None of the study participants manifested any type of chronic psychological dependence on welfare. All of these women belied the prevailing stereotypes which often characterize welfare dependent mothers as psychologically deficient, uncommitted to work, lazy, or immoral. All of these women held an unwavering commitment to provide a better future for their child(ren) and they all sought to improve the conditions of their lives economically, once they believed that their children's welfare would not be jeopardized.

Although their chronological ages spanned almost twenty-five years, each of the study participants perceived herself to be in a formative stage of her life where she could take the necessary steps to become independent of welfare support. A nursing career was viewed as a profession which would provide the means to achieve self-sustaining, economic self-

sufficiency, while also rewarding them with a sense of personal fulfillment.

Becoming independent of welfare as quickly as possible was a longing which each of these women expressed. Thirty year old Rose had already been on welfare for three years when her social worker suggested that she enter a four year nursing program to enable her to earn a greater salary upon graduation. Rose's angry response to her worker exemplifies the negative attitude the study participants shared regarding their welfare dependency.

She told me that four years isn't that long. I told her this is MY life! I said if you don't think that four years isn't a long time, I'll tell you what. I'll trade roles with you. You go on AFDC. You go live in my apartment where I'm living and deal with some of these mothers who don't even care less about their kids. You live in that environment for four years and tell me how you're going to like it. She made it seem like, so you'll go to school for four years. You'll get a babysitter that will bring up your kids for four years. And, you know, you're life will be better. No, it's not that easy. I told her that I'm going to go to a one year LPN program, then I'll get a job, and then I'll finish my nursing education at night school.

Natalie, who has been intermittently dependent on welfare since the birth of her five year old daughter expresses her dissatisfaction with welfare.

My finances are hard. Nobody that I know who are in their right minds would want to be on welfare unless they have six kids and they're lazy, because it doesn't pay to have one kid. I wouldn't want to stay on it, that's not for me. I could never live the way I wanted to live on welfare.

Lisa who is thirty-one and twice divorced with three children ages ten, eight and eighteen months describes her frustration with being welfare dependent while trying to juggle working as a homemaker/health aid, completing the prescriptive developmental and academic coursework of the second program component, and mothering her children.

Welfare doesn't help me with my child care because I won't put my son in a day care center. I have my girlfriend babysit for the baby and I have another friend there for the girls when they come home from school. So I have to put money out for that. And now I've been terminated for the medical and I went back to welfare to reapply, and they told me I can have it. But I have to go back again and fill out forms, and with work I can't get there, even for their latest appointment. I try to explain to them that I work and if I take off from work, I'll get a bad work record. They don't have any evening hours. It's incredible, you, know, you're trying so hard and there are all these obstacles that are continuously in your way. I'm very determined and I very much want to. I hate welfare. I hate living like that.

Contributing to each of these women's successful change process was a psychosocial interest in developing an identity outside of their role as mothers and homemakers. Lisa describes this need.

I wanted to get out of my house and away from my children. It was my out. It made me feel great about myself. Like wow, I can do something besides take care of kids, you know. And of course, you meet friends. You just feel good about yourself.

Although twenty-five year old Kathy, mother of two children, was one of the youngest study participants of the group, her voice resonates the feelings of other women.

I want to do something for myself. I want to have something outside of family, kids, and house. I want to have something that I enjoy doing, that I really want to do. You have to give to your kids, especially when they're young. I'm not going to give my all and have nothing to give to the rest. I want to have something else in my life outside, for me, for the world, for people. You know I just want to have something outside of my life, outside of being home.

All of these women recognized the stigma which welfare dependency cast upon themselves and their child(ren). Thirty year old Rose who receives no child support from the father of her two children describes this victimization.

They look at you and say, this woman she has two kids, she's not married, it's her fault. It's the attitude that society has. It's not her fault! There was somebody else involved. These children just didn't pop up. The woman has to take on the responsibility of what the man left behind. They are my children. They also belong to somebody else, the man I was with at the time when I had the children. But you know, society looks at the woman as the one who's supposed to take care of the children. That's your role, these are your children. It's ok for him not to accept the responsibility. Then they categorize you for being on AFDC and say, oh my god, look at all these mothers that are on welfare. I don't know how you can blame some of them for not wanting to try when they have to go through all this stuff to just even try.

Having been on welfare for the past three years, Rose relates the ongoing struggle to maintain a sense of dignity and financial stability for her family.

The thing that really bothers me about the system is that you are really already at a low level, people already classify you as being lower than the average working person, or whatever. There is definitely a stigma to collecting welfare. I think that they should

make the system so that people have enough for the necessities. My god, if this woman needs diapers, or toilet paper in the house, or tampax or whatever, that she has the money to buy these necessities. As far as they're concerned, these aren't necessities. These are luxuries! Now, how can you consider toilet paper a luxury? Really, that is a little bit farfetched. Just last week, I had to go to the electric company, my bill is like up to \$300. I haven't been paying my electric so that I can be paying my gas 'cause the winter is coming and the gas is more important than the electric, right now, you know. So what I did was, I went down and I made an agreement to pay \$30 a month and to try and keep up with my bills. That's the best I can do. But it's like you're constantly juggling.

Consensus was strong among the study participants that the existing system of welfare provided no incentive for individuals who seek economic self-sufficiency. In fact, women who had attempted to become economically independent of welfare through education and career related training found that existing welfare policies served as a deterrent to reaching their goals. Debra, who completed all four steps of the Career Access Program and is currently employed as a licensed practical nurse affording her economic independence, describes her experience.

I was in LPN school and working too. I needed some help from welfare, but they weren't supportive. I was trying to better my life. They said they can't help me do anything. I said, yeah, if I was to quit my job and just sit home on my butt, you would just keep the money coming and I could have my boyfriend living here and everything. And here I am, a struggling woman. You know it's only going to be a matter of ten months and then I'll be away from here for good. And you can't even help out. My finances

during the LPN was my toughest time. Even to this day, I still have some back bills, that have to be paid, like you know, my gas bill, and my electric, 'cause I couldn't pay. I paid what I could to survive. The kids ate what they ate to survive. And that's basically how I did it. I survived the best way that I could because I knew things would get better, much better.

Impact of Role Strain Conflicts on Psychological Readiness

Another related and prominent psychosocial theme which emerged from the study findings was the critical impact a woman's stage in mothering, that is, the age related needs of her child(ren) had on her readiness to work through issues of self-development and yearnings to improve her family's economic status. Exclusively within the context of their parental responsibilities and obligations as sole caregivers of their child(ren) are welfare dependent mothers able to view their own needs. The study findings provided strong evidence that a welfare dependent mother's primary responsibility for the well being of her child(ren) from an economic, social, intellectual, physical, and psychological perspective limits her self-perceived options for economic self-sufficiency. Women's real-life role strain resulting from combining single mothering with full time work is exacerbated for welfare dependent women who lack "purchasing power" to avail themselves of external options such as cleaning help, child care services, and leisure and recreational outlets to ease their burdens. This lack of financial resources adds immeasurably to the complexity of their lives.

Outside of the strong support provided by their own mothers, these women relied primarily on individual internal resources to meet the overwhelming demands of single parenthood which centered around nurturing and caring for their child(ren), maintaining some semblance of housekeeping, shopping on a very limited budget, juggling monthly bills, and providing social outlets for their child(ren). Obstructed by the overwhelming real-life demands of impoverished single parenthood, these women were unable to bring focus to their own individual developmental needs until their family's infrastructure was able to support their efforts.

Even once these women became enrolled in the Career Access Program in Nursing, regardless of their age, whether in their early twenties or mid-forties, their lives continued to be shaped by their childrearing responsibilities. They all shared common life patterns in that little time was available to pursue a social life, to complete homework assignments to their satisfaction, or to catch up on the rest required from working "double days." Their week-ends were designated as that time devoted to their child(ren) to compensate for the lack of time available during the week. Their health and the health of their child(ren) were critical variables which dictated their ability to seek work, to continue a current job, or to attend school.

Constant "pacing and planning" of their own lives was a necessity in order to maintain a basic standard of mothering

and a semblance of family life. Upon entering the Career Access Program the study participants' ability to adequately plan and pace themselves assumed an even greater importance, and in a real sense, imposing the mastery of this requisite skill became a significant program intervention pattern.

Women with larger families, three or four children, experienced substantial role conflicts in trying to maintain balance between exhausting home responsibilities and the additional responsibilities of attending school and/or working. They required more time to move through the various program components due to the inevitable conflicts which their demanding schedules presented.

Welfare dependency with its severe financial restrictions combined with the complexities of single parenting placed harsh constraints on the ability of study participants to pursue long term education or career options which may have been increasingly more advantageous from a self-development and economic perspective. Pursuing career goals which would demand many years of education, considerable financial outlay, or long hours away from their responsibilities as mothers was not perceived to be within their reach. Consideration of their family's needs shaped their every decision.

These constant real-life role conflicts experienced by the study participants were a constant source of frustration and guilt. Struggling between their own needs for a role outside the home and the mothering realities demanded by their

children, they became immobilized from taking action. Even after they became enrolled in the practical nurse training program lingering doubts remained about whether they had selected the "right" time to strike out for self-fulfillment and economic independence.

Kathy who had been on welfare for seven years and has a three year old daughter and a seven year old son typifies this role conflict dilemma. When Kathy was asked why she had decided to enroll in the practical nurse training program at this stage of her life, rather than earlier, her response conveys the complexities involved in moving towards economic self-sufficiency for welfare dependent mothers with young children.

My daughter was sick for ten or eleven months. I felt that my place was in the home. She had meningitis and chicken pox. I thought I should be there with her. Being on AFDC, I shouldn't go out and push myself if I am going to have to turn back. If I was to do this a year and a half or two years ago and something else happened, not only my daughter getting sick, but I don't have a car. It's tough in the morning because of the hours my son is in school, plus having to leave my daughter with a babysitter, and having to walk or bussing it. It would be a little impossible. Fortunately my daughter's day care is two blocks from the house, now it's planned out. It looks like it's planned out for me. Things are different. I just didn't want to push myself before and end up having to either get kicked out of school if I couldn't get there in time or if I had to take so many days off. As my daughter got a little older it wouldn't bother her, and it wouldn't bother me as much. I didn't want to be running out on them when they were small. I just didn't want to begin something, if I

was going to have to turn around and end up where I started.

Kathy had just completed the first component of the program, the Patient Care Assistant training, and although she was feeling a sense of confidence about her ability to successfully continue on into subsequent program components, the tenuous and fragile nature of her progress is evident in her discussion of the "blockades." When asked to describe the "blockades," Kathy responds:

Right now, I'm trying to block all blockades from not letting me do it. Blockades are anything like kids getting sick, snow days, bills, school. Could be a number of things. I've just had so many things on my mind about those things. I just want to make it, I just believe that right now, that it's full speed ahead. I'm trying my hardest. I do really want to make it.

Kathy had aspired to become a registered nurse (RN), but had quickly come to the realization that juggling the school commitment required to undertake such a plan while maintaining her primary role as a mother would be an impossible course of action.

When this program first started, I believed that I could have just gone directly into RN. And I had wanted to go to RN. There were a few instructors who told me to go right into RN. Well, I don't know if they have children or how much time they have, but when I found out how much time I would need, I knew I didn't have that much time. So I have to do it in steps and I don't mind because you learn more.

Natalie, a twenty-five year old, single parent of a five year old daughter, is currently enrolled in the licensed

practical nurse (LPN) training program, the third program component. In order to maintain her high standards of academic performance, Natalie is heavily reliant on both her mother and grandmother to care for her daughter during the day while she is at school and during the evening and weekends to allow her sufficient time for studying. Because her five year old daughter still requires a great deal of mothering, Natalie is experiencing considerable role conflict about her decision to undertake the steps to economic self-sufficiency at this stage of her life.

I said to myself what am I doing? I'm young, I don't have a husband. I have a little girl, she's still little. I might as well get this over with. I want to do this sooner than later anyway, so let's get started. I wish I had the time for her. I try to make the time for her. I look forward to being with her. She hates the idea of me going to school. She's at the point where she hates that school and every morning she says, I wish you'd quit that school. She's in a preschool program, she's very intelligent. Like when she knows I have a test, I can see it in her. She gets upset and says, it will be all right, it will be all right. I'll go to grammy's, she says. She hates that school. When I'm running late for school she gets very upset because she knows that they take three points off if you're late. So it's like she hears everything, and she says, oh mom, I don't want you to get three points off and we start running around the house. When I had to travel to my clinical site in Providence, I had to get her up at 4:30 in the morning. No child wants to be gotten up at 4:30 in the morning, and it was winter and it was very cold, and it was dark, and she's crying, and I'm thinking should I have waited to do this, should I have waited to do this?

Natalie also talks about the decisive impact her mothering role has had on her life and how being solely responsible for her five year old daughter shapes her every decision.

Becoming a mother definitely changes you, but for the better. Everything, everything evolves around her [my daughter]. How what I do is going to affect her. Before it was like ok, I don't have to worry, I'll suffer the consequences. But now, it's but she's going to suffer what I do. So every decision I make in my life has to include her. Sometimes it's hard on me, because sometimes I'd rather do other things.

Rose, a twenty-nine year old single mother of a one year old daughter and a three year old son provides insight into the complex "double day, double burden" life of a welfare dependent mother with young children.

My mom helps. Between my mom and my brother, they watch my children for me. I'm very funny about that. I don't really want to put them in a day care center. You just don't know who to trust nowadays, you know. And my son has a lot of problems, medical problems with his ears and he ends up having ear infections for a month at a time. So I prefer to have them at home with my mom or my brother. So they watch the children for me which makes it easy. But the housework, the kids, doing the chores, I do all of that on my own. I basically have a schedule and I try to keep to my schedule.

When asked to describe her schedule, Rose relates:

Well, I get up in the morning at about 5:15 or so. I go into the kitchen and make myself a big pot of coffee to wake myself up and then I make the kids' breakfast and I get the two of them up. Usually my son feeds himself, so I change my daughter and get her all dressed and feed her. Then, I'll eat breakfast myself if I have time, if not, I don't eat. And then, by that time my mom usually gets there by about 6:30 or so. I

have a cup of coffee with her and leave the house for school by 7:00. I generally get home about 4:00 depending if I have to do something like go to the grocery store or have an appointment somewhere. I come home and cook supper. After supper they both take a bath. They're young enough so I can put them both in the bathtub together. After supper we have like an hour and one half which is our time, for me and the kids. I'll play with my son and I'll play with my daughter. At about 6:30 I try to calm them down a bit so they know they're going to bed. At 7:00, like clockwork, they go to bed. And what I do, is after I put them to bed, I study. Sometimes I'll go to bed like at 8:00 right after they go to bed, and I'll get up at 2:00 in the morning and study for a few hours depending on what I have for the day.

Beverly, who is forty-nine and the oldest of the study participants, completed the four components of the CAP program in just under two years. While maintaining her position as an LPN, she is planning to continue her education to obtain her registered nurse degree. Now that her children are grown and demand much less of her time and attention, Beverly who is free of role strain, has been able to make significant academic and career related progress in a very short period of time.

At my stage of life, you realize that I can't play here at school, this is not a play time, this is a work time. I have a lot to accomplish. This is going to impact my life. When I graduate, I just don't want two years, and then have to retire.

Intergenerational Affiliation and Interconnectedness

The gender preferred relational mode of affiliation and interconnectedness was clearly evident within three significant areas related to the study participants' process

of transformation: career choice and satisfaction, intergenerational connection and affiliation, and learning preference and style. A full discussion of the interplay of this relevant gender related theme within each of the aforementioned topical areas is presented in this section.

For the women of this study entering a "career of caring" -- nursing, fulfilled their psychological need for interconnection and promoted their satisfaction with their career choice. The gender related theme of interconnection and affiliation manifested itself as a primary motivator for these women to undertake the rigorous demands of nursing training. Each of the study participants valued relationships of caring, responsiveness, and concern for others and perceived nursing as a career which was compatible with their self-definition. This "ethic of care" and responsibility was a consistent theme embedded within the moral universe of the study participants. Viewing the sick and elderly as vital individuals deserving of respect and admiration, study participants felt a personal obligation to provide the highest quality of care which was within their capacity. Giving voice to a morality of interdependence, they dispensed the type of optimal care which they would want a caretaker to provide for themselves or their family members when they became old and decrepit. Study participants had a keen sense of their own mortality and viewed the elderly as

once connected individuals with families and responsibilities and deserving of dignity.

Twenty-five year old Natalie's comments provide insight into how this gender related theme is translated in terms of career satisfaction and pride.

I had worked as a cleaning woman in a motel and I had worked in a rubber factory, and I had worked as a clerk in a discount store. Those jobs are more like any other jobs. I mean, you know, you get into stuff where ever you are or where ever you work, but you know, nursing is different kind of work. I wouldn't even put nursing up against a job like that. You know, in my eyes, a job is a job, you have responsibilities, but anybody can do that kind of job, you know what I mean. If you walk off the street you can get a job like that, taking care of shelves, But nursing on the other hand is a lot more caring. You may have paperwork and numbers in your hand, but with people, it's their lives and it's different.

When Kathy was asked to share how she went about selecting nursing as a career choice, her words give voice to her gender related need for interconnection and the self-satisfaction she receives from caring for others.

It makes me feel more fulfilled in my life to make somebody else's life better. If I can do something for someone else, it enhances my life. I feel I do better with the elderly. I have respect for the elderly. They can teach me as much as I can teach them. In my patient teaching, they give me something in return. I love to listen to them talk. I always think that someday that will be me, or my mom and dad, and that's how I treat them. I would like private duty so I could be involved with the patient's family and be right there with them and be a companion, not only a nurse. Somebody that they could know, not just know me as their nurse, but they

could know me and I could know them. And I could make their last days more comfortable.

Rose's words convey the tremendous satisfaction she receives from her caring role.

I like working with people. I always have. I get along with everyone. I have a million friends. I like to help people if I can, and I always did it for my mother when I was younger. I've had older neighbors that I used to run errands for and I have one in particular that I used to take care of when she was sick. This is going back a long time, she showed me how to give her a diabetes shot and I think that is one of the things that made me really look forward to nursing because I did so much for this woman, and she was so sick. I couldn't see her being by herself, you know. I was always there for her. But, I like being with people, I like helping people. I love to do the best I could or can. Now in the nursing home I feel good that I can do for patients what other people don't do. I felt good. I got so close to some of the patients, you really shouldn't get that close. It's a good feeling though that you could really do something for them.

The second major area where the study findings confirmed the importance of the influence of the gender related theme of affiliation and interconnection was within the study participants' relationships with their mothers. All the women had strong connected and valued relationships with their mothers; and although the age of their own mothers ranged from the early forties to mid-sixties, the nature of their relationships with their mothers was very comparable. Common references to their mothers included such phrases as: "I talk to my mother a lot; my mother, she knows everything; my mother, she's a help; when things get tough, you go and

talk to your mother and you sit down and have a big cry."

This dominant and consistent theme of intergenerational connectedness was universal among the study participants and played a critical role in their successful transition process. These women's mothers demonstrated a single minded commitment and keen sense of responsibility to continue mothering their adult daughters in order to improve their daughter's futures and that of their grandchildren. All of these welfare dependent women's mothers, except one woman whose mother was ailing and alcoholic, but whose father assumed the support role, demonstrated their commitment to their adult daughters by helping them pay overdue bills whenever their means permitted, by providing quality, dependable, no cost child care for their grandchildren, and by being a reservoir of emotional sustenance and support. Through their own maternal practices, these mothers seemed to have ingrained in their daughters a strong value for family and a keen responsibility for childrearing.

Twenty-nine year old Rose, who has a three year old son and a one year old daughter expresses the support she receives from her mother.

My mom thinks it's great that I've finally decided what I want to do. You know, it took me a while, but, she thinks it's fantastic. She's very supportive of me, which makes it easy.

These women expressed unequivocally that without their mother's support they would be unable to attain their education

and career related goals. As Natalie, a twenty-five year old single parent of one child, concludes:

I wouldn't recommend this program to a single mother without any other adult support. You see, in my family I can run to my mother, but not everyone has that. My mom and my grandmother, they take my daughter. My mom took her overnight, because I had an exam this morning and I had to study. But without that, I couldn't do it, no way.

Resonating this reliance on their mother is Lisa, a thirty-one year old mother of three children.

My mother, she's been helping me with a little electric. You see, if I didn't have my mother...my mother works and she's sixty-three and she's ready to retire. But she's not retiring 'cause she's helping me and my kids. She knows I need her help. If you don't have your mother, you won't be able to get through the program. I wouldn't have been able to.

Beverly, whose mother is now in her mid-sixties, describes the interconnected role her mother has played throughout her life and especially during the past few years while she was enrolled in the Career Access Program in Nursing.

My mother helped me. When I needed to get away she took my children for me. I mean she was very supportive. My mother was more of a sister to me and that helped me accomplish the things that I needed to accomplish because she was there, because I could fall back on someone. And I have seen this with other people, when there is someone there, well, I know that I can do this, if I fall there is someone there, who is going to help me up. That was the feeling, that is what I had, even before I started school. In my life she was there to help me.

In addition to the close relationships these women shared with their mothers, all of the study participants recognized

the importance of positive attachments in other areas of their lives. Each of them maintained current supportive relationships with women friends, relatives, and/or a boyfriend. Some women referred to negative unsupportive relationships in their past and indicated their realization of the undermining impact these relationships had on their lives. As Lisa, a mother of three children, explains:

Negative people hold you back. You really have to have a support group. I have friends who help me with my kids. Sometimes, it seems like, how am I ever going to do this? But you have to be determined and have positive thinking and not be around negative people.

The third and final area in which the study findings evidenced the influence of the gender related theme of interconnection and affiliation was within the classroom. Each of the study participants felt that they learned best from teachers who were warm, friendly, and approachable and that a collaborative approach to learning was important to their academic success. Rose, who is currently in the program's third component exemplifies this interconnected, affiliative approach to learning.

I learn better in a class where you can socialize with your teacher, where you can have a normal conversation. It's not like this is the authority figure and I know more than you, so you're just going to listen to me and you're going to get out of this, what you're going to get out of it. And if you don't get anything out of it, that's your problem. I think that they're lousy teachers because of that.

Kathy also voices her enthusiasm for her Patient Care Assistant Program instructors and her value for a collaborative approach to learning.

You can go to them. Our instructor was so good. We wrote notes constantly and if we didn't understand we could interrupt. She would stop and explain people's questions. The teacher cared and we all accepted her authority as a teacher. She was there, she was always there for us. Friendly, nice, warm relationships with all the instructors that we had.

Kathy also expresses the collaborative approach to learning which students developed both inside and outside of the classroom.

The students helped each other. We were friends. I mean we didn't call each other on the phone all the time, but we would help each other out.

The gender preference for a collaborative, rather than a competitive learning environment is clearly heard in Rose's voice as she states her strong dislike for learning environments where student competitiveness interferes with her gender related preference for interconnection.

There's a lot of competition in terms of attitudes with fellow students. Some will do whatever they can, and use whatever means, just to get you out of the program or just because that's a better chance for them to get through the program. You don't even have to say anything, you can see them, you can just tell. In a profession some type of competition makes it interesting, but not when it gets to the point where it's going to get in the way of your relationships with your fellow students.

Important to strengthening their academic gains and cognitive growth, the study participants voiced their preference for an integrated, experiential approach to learning which combined academic instruction with hands-on learning. Kathy describes the benefit of this type of learning environment:

First we would learn something in the classroom, then we would go into the lab and do it, and then we'd go back to the classroom. Everything fit together, it helped you learn.

Angela's words reinforce this gender related preference for an experiential approach to learning in order to stimulate a sense of competence and mastery.

I learn best by hands on. If I just have to sit in a classroom, I don't take great notes. I'm the type who can do it better, if I was to do it, rather than have some one sit and talk to me. The clinical part was the best part. It was interesting. We saw things. We learned good skills. We were good workers.

Rose is currently in the licensed practical nurse training component which requires a clinical rotation within a hospital setting as part of the learning process. Rose also conveys the confirmatory experience which "learning by doing" instills.

I love the clinical. I have a great time. For me, this is just the way I feel, everyone has their own personal view of it. I think that hands-on training is where you're going to get your training. You can be taught anything out of a book, some people can memorize it faster or slower. But once you get out there, when you're doing the work, it's totally different. 'Cause what you learn from the book isn't exactly how you apply it to that situation, you know. So

for me it's great, I love it. This is my best favorite part of the whole thing.

Section Two: Analysis of Developmental Findings

From a developmental perspective the internal transformation experienced by the study participants can be characterized as an "incremental change process" which came about over a relatively long period of time through participants' active engagement in various academic and career related training components. Overtime, changes became "cumulative and self-sustaining" as evidenced by significant improvements in cognitive and psychosocial functioning. Among the study participants, there seemed to a confluence of cognitive and psychosocial growth with growth in one domain nurturing growth in the other. However, in order to provide a clearer understanding of this "interrelated and interactive" growth in the internal cognitive and psychological functioning of the study participants, the research findings related to each of these dimensions of change will be discussed separately.

Manifestations of Cognitive Growth

Upon completion of the first component of the Career Access Program in Nursing, the 220 hour Patient Care Assistant Training, the cognitive gains of study participants were clearly manifested in the areas of skills development and task mastery. The Patient Care Assistant

Component, a combination of academics and technical skill building, was structured to provide a mastery learning or competency based instructional approach. Throughout this component, and daily during the clinical portion of their training, program participants were provided with evaluative feedback regarding their newly learned skill competencies and areas in need of improvement were identified. Each new learning session was structured to build upon prior learning to establish a higher threshold for upcoming learning. In Appendix E a sample clinical evaluation checklist which was completed daily by clinical supervisors and discussed with students is provided to illustrate this task mastery approach to learning. Regular evaluative feedback provided participants with positive, constructive feedback on an ongoing basis and served as a personal diary of their individual successes and growing competencies. Subsequent program components reinforced this challenging, but supportive learning approach and built upon this established framework for learning.

The critical interplay of the competence domain with issues of agency became increasingly clear as study participants progressed through each program component. As study participants demonstrated intellectual competence within their developmental and academic coursework and were able to translate this competence into valued earning power in their workplace situations, they consistently felt more

control over their lives. Recurrent intellectual and skill mastery gains increased self-confidence and improved future academic performance.

The "cumulative dimension" of the learning process was observed within study participants' classroom, clinical and workplace experiences where previously learned skills became the foundation for confronting new learning. The "self-sustaining" nature of the learning process became apparent as study participants progressed upward into each of the more demanding learning situations required by successive program components and were able to apply and adapt previous learning to each new learning situation. Program participants were able to demonstrate to themselves, their peers, their teachers, and to "supportive others" including their children, their proven ability to achieve measured academic success. This ongoing process of skill acquisition, task mastery and intellectual gain became an ongoing source of self-empowerment which had a self-sustaining quality.

For example, the development of study skills, time management skills, home management skills and problem solving skills were some of the initial tasks which required mastery during the first program component. Once program participants mastered these skills, successive program components drew upon these newly developed skills and added a higher dimension of qualitative complexity. Appendix F

provides a more thorough analysis of the skill mastery requirements for each of the four program components and suggests cognitive and psychosocial developmental theory related to the transformation and growth experienced by the study participants.

A proximate identification of each of the study participant's stage of cognitive development was gleaned from lengthy conversations and through a contextual analysis of their transcribed responses to specific probes related to epistemological development which were embedded in the interview protocol. Using Belenky's (1986) categories of epistemological perspectives which refer to assumptions about the "nature, limits, and certainty of knowledge," three of the eight study participants appeared to be "received knowers" and five appeared to be "subjective knowers." "Received knowers" did not view themselves as a legitimate source of knowledge, but saw knowledge as coming from external authorities.

Typical of the "received knower" is Natalie, a twenty-five year old, single mother of a five year old daughter, who had graduated from a high school college preparatory program and had the strongest academic background of the participant group. Nonetheless Natalie required a developmental math course which she completed with an A grade. In addition, Natalie successfully completed a college level biology and psychology course prior to entry into the licensed practical

nurse training program component. In response to specific probes embedded in the interview protocol to determine her epistemological perspective, Natalie conveys her belief that words are at the "core of the knowing process" and expresses pride in her capacity to "learn by listening" and through "receiving, retaining and returning" knowledge given to her by "authorities."

Coming back to school here was a joy. I love tests because a test will show me how much I know. And when I study for a test, I can't wait to get that test in front of me and get that information down and get my grade back. I get excited about how much knowledge did I retain. How much knowledge did I get. The LPN program is so compact, I feel that I'm getting rushed. It's going in fast, it's not staying as long, because I only have so much time to get it in and know it, 'cause it's a lot of memorization and I just want it to be there for my life. And it just doesn't seem like a lot of stuff is going to be there, because I'm trying to learn too much at one time. But the more they put on me, the stronger I get. When they put more pressure on me, it's like I say that's it, you're not doing this to me and I kick into high gear. I have a high tolerance level, higher than any I ever imagined.

Natalie, along with Kathy who is also twenty-five, are the two youngest women among the study participants. Kathy, who is in the first component of the Career Access Program, also appears to be a "received knower" as indicated by her responses to a series of questions developed by Magolda and Porterfield (1988) to determine epistemological perspective. When Kathy was asked to respond to the question: When two instructors give different explanations for historical events or scientific

phenomena, and explain the same thing differently, can one be more correct than the other? Kathy struggled with her response to this question, first writing down her response as "no," and then crossing it out, and finally concluding that "not necessarily is one more correct, but one instructor may get the facts out clearer for better understanding." Within Kathy's "received way of knowing," "authorities" are always right and "know all right the answers" and only one "right" answer exists. When asked how she would decide which explanation to believe when given two explanations for the same situation, Kathy responds, "If I wasn't sure I would go the library." And when asked the question whether one can ever be sure of which explanation to believe, Kathy responds, "Yes, through research." Clearly, at this stage of her epistemological development, Kathy is unable to conceive of herself as a legitimate source of authority, and therefore relies on "external authorities" which she sees as instructors and libraries.

Women who appeared to be "subjective knowers" seemed to have developed "personal knowledge" based on their extensive life experiences and they had come to develop a trust in their own private "way of knowing." Having developed extensive mistrust for authorities and institutions as a result of their welfare dependency experiences, the study participants who appeared to be "subjective knowers" had developed their own "inner voice" as a survival response to the ambiguities and

uncertainties of their life situations. Angela, a thirty-three year old, Hispanic mother of three young boys, exemplifies this "subjective way of knowing."

From a very young age Angela, the oldest of seven children, had to manage the complexities of living with an alcoholic mother, the impact of racism on herself and her family, and the disappointments of unfulfilling male relationships. Angela left home after graduating high school, joined the service, and had done some traveling. The ambiguous nature of many of her life experiences seemed to have nurtured Angela's epistemological development and her understanding of the "nature of knowledge, learning, and truth." Angela had come to view truth as "personal, private, and subjectively known" and her "way of knowing" had become an important adaptive strategy for her own "self-protection, self-assertion, and self-definition." As was the experience of many of the "subjective knowers" which Belenky (1986) had interviewed, Angela's "return to education followed the onset of subjective knowing; it did not usher it in."

In listening to Angela's "voice" to a number of questions of an epistemological nature, her internal "subjective way of knowing" becomes clear. When asked to respond to the question, when two instructors explain the same historical events or scientific phenomena differently, can one be more correct than the other, Angela responds: "They both have their own views." And when asked when two explanations are given for the same

situation, how could you go about deciding which to believe? Angela responds, "I would ask them why they came up with their theories, and then decide." When asked, can one ever be sure of which explanation to believe, Angela responds, "No." And when asked, if one can't be sure of which explanation to believe, why not? Angela responds, "Because everyone, will have their own views on things, even myself." Providing reinforcement for her epistemological perspective which values her own capacity for knowing, Angela states: "College is a place where everyone is an adult and should be treated and act as such, especially dealing with voicing of opinions and ideas." For Angela, truth is personal and grounded in first hand experience, which is why when asked the question: Which interactions enhance her own learning? Angela responds, "Interactions with personal experiences and applying those within our lessons."

Among the study participants, age, nor years of formal education was not predictive of epistemological perspective. However, it is interesting to note that the two study participants who had completed only the first step of the program, the Patient Care Assistant component, appeared to be "received knowers" along with one study participant from the program's second component, the Development and Academic Coursework, while the remaining five participants who had progressed further along in the latter program components appeared to be "subjective knowers." Table 10 portrays the

epistemological perspective of the eight study participants in relation to their place within the four successive program components.

Table 10
Epistemological Perspective of the Study Participants

STEP	Step I	Step II		Step III	Step IV
PROGRAM COMPONENT	Patient Care Assistant	Academic/ Developmental		LPN School	Employed LPN
EPISTEMOLOGICAL POSITION	(2) Received Knowers	(1) Rec'd Knower	(1) Subj Knower	(2) Subjective Knowers	(2) Subjective Knowers

The complex and rich learning experience gained from mothering seemed to have provided a fertile environment for study participants to move from the epistemological perspective of "received knowing" to "subjective knowing" within their parental domain (Belenky, 1986). Through their maternal practices they had developed a belief in their own intuitive sense of what was "right" for their children and were able to give "voice" to this "inner sense of knowing and authority." Rose, a single twenty-nine year old mother of a three year old son and a one year old daughter exemplifies this "maternal way of knowing."

In relating a story about her young son who had a series of ear infections, one series lasting over two months, Rose's "voice" clearly indicated that she was responsible for making the decisions regarding her son's plan of care, rather than turning that authority over to the physician who wanted to remove both his tonsils and adenoids. Rose states:

My son was eleven months old when they put the first set of tubes in his ears and they wanted to take his tonsils and adenoids out. And I told the physician, look, I'll go along with the tubes in his ears and the antibiotic medication. We'll try that first, and if that doesn't work, then we'll go all the way, the way you want. But 'til then, let's try one step at a time. How is an eleven month old supposed to tell you that they can't swallow? It just didn't seem practical to take his tonsils out that young. When he was almost two years old he had to have the operation. I actually had to force feed him juice. He lost like eight pounds and he was on tylenol and codeine for almost two weeks, bumping into the walls. But different things like that happen, I don't get panicky. A lot of mothers, if their child has a fever, they get all panicky and they call the doctor. I don't get panicky any more. I'll try tylenol, I'll try some cold medications, you know, over a period of a couple of days. And if that doesn't work, then I'll call the physician up. So I think being a mother makes you a little calmer when you understand things at a different level.

Manifestations of Psychosocial Growth

Clearly, the cognitive findings which have been discussed are of significant interest; however, the findings which are most compelling lie within the psychosocial domain. The research findings indicated that at the core of the study participants' internal psychosocial transformation process was

the "restructuring of their self-identity." This "internal restructuring of self-identity" involved incorporating within each woman's inner reality the capacity to view herself as a woman capable of "taking care of herself" in both an economic and psychological sense while living within the "socioeconomic reality" imposed by a white male society.

Manifestations of internal psychosocial growth of the study participants became evident over time as they progressed through each of the successive program components. The recurrent process of achieving program goals and internalizing cumulative successes lead to formative improvements in feelings of agency and authority which provided the "building blocks" for reshaping identity development. This accretion of positive change was reflected in heightened feelings of agency and empowerment which was carried over into other dimensions of the study participants' lives -- in their roles as mothers, homemakers, and workers.

Study participants were able to give voice to their own internal developmental changes in psychosocial functioning which they had transferred ably into other domains of their lives. They spoke about their improved ability to handle their parenting role by demonstrating more patience to meet the needs of their child(ren); they described how they were functioning better in their homemaking role by being more organized and purposeful; and, they articulated increased optimism about their futures as primary wage earners and their increased

ability to provide a better life for themselves and their child(ren). These increased feelings of self-efficacy led to perceivable improvements in self-esteem and self-confidence. In giving voice to these feelings of increased self-determination and competence, women used such phrases as, "I have more patience, I'm less judgmental, I am calmer, I am better able to cope, I am less depressed, I am happier, I am a lot more confident, I have more pride, I am more secure, I have a future to look forward to."

As discussed in this section, the process of successfully working through the psychological tasks of reformulating one's gender role to encompass a self-identity as a primary wage earner capable of economic independence was the most compelling study finding and will be expanded upon in the following section.

Process of Gender Role Reconstruction

The complex relationship between female dependency and empowerment for welfare dependent women was found to be indelibly circumscribed within their class, socioeconomic status, and gender role. Stigmatized by society's accumulated negative psychological stereotypes associated with welfare dependency, these societal stereotypes not only reinforced these women's self-identity insecurities, but also undermined their psychological capacity for undertaking the intrapsychic tasks involved in self-identity reconstruction.

For these women, the reality of class stigmatization was reinforced continuously through the insensitivity of harried social workers, through their weekly declaration of poverty status at the market when they exchanged food stamps for groceries, and through the monthly ritual of fending off bill collectors by juggling rent, electric, gas, and other such necessities. Their lack of economic value was reinforced in the workplace where they held primarily unskilled, low paying jobs, and as a result, found themselves forced to augment meager earnings by working within the underground job market where they continued to be exploited due to their deprecated class status.

In the historically and culturally prescribed gender role of undereducated mothers, childbearing and subsequent commitment to childrearing unalterably changed their life script and cast them economically dependent upon the father of their child(ren) for economic survival. When that support was not forthcoming, they found themselves dependent upon a system of welfare designed to reinforce their dependency through countless punitive rules, incessant monitoring, and subsistence payments.

This powerful combination of gender, class, and socioeconomic status shaped the reality and world view of these welfare dependent women and impeded their ability to overcome the significant psychological, social and structural barriers which impacted their lives. Void of the necessary

feelings of agency required to claim the power or make the choices which might have enabled them to retain some control over their lives, initially many of these welfare dependent women complied with life situations as they unfolded and perceived themselves as unable to alter their own life pattern. Voice is given to this phenomenon through the words of one study participant. "I met a man and I wish I had left him alone. But you know, things happen, so that I ended up having a child." Remaining in abusive relationships and continuous unplanned pregnancies appeared to be typical manifestations of such behavior.

Why then, despite seemingly overwhelming barriers, were the women who participated in this study able to rise above the constraints imposed by their gender, socioeconomic, and class status and successfully undertake the steps to become economically self-sufficient? Although the educational and social backgrounds of the welfare dependent women who participated in this study differed significantly, as well as the precipitating experiences which led to their becoming welfare dependent, the challenges they faced to becoming economically, self-sufficient remained quite similar. To gain the skills they needed to earn a family wage, each of them had to overcome the stigmatizing barrier of their deprecated class status, confront the economic and psychosocial barriers of female dependency, and undertake the

multiple challenges presented by a lengthy and demanding education and career related preparation program.

Although a number of critical dimensions coalesced to promote these study participants' success, their "ability to reconceptualize their gender role" as women who were capable of economic independence proved to be a vital component of their transformation process. These women regarded the experience of welfare dependency with such negativism that this inimical life experience had a formative impact on shaping their ability to internalize the value of education and career related skills which could provide them with the means to economic self-sufficiency. A valued outcome of these women's successful program participation, was that they no longer viewed a male figure or a husband as their sole vehicle to economic security -- they were ready to assume full responsibility for their lives in both an external economic sense and an internal psychological sense. Reflective of having taken this formidable journey to guarantee their own economic independence through entry into a profession, each of the study participants poignantly stated with newly found pride in a "new and authentic voice," that never again would she remain in an inadequate relationship for financial reasons, and if she married in the future, it would be for love, not for an economic arrangement.

The negative relationships with the father's of their child(ren) which these women experienced also helped foster

their ability to reconceptualize their own gender role as one with meaning and identity outside of marriage. Their subsequent welfare dependency served to alter their view of a man as a means to economic security and transformed their concepts about marriage. Natalie's voice gives evidence to this component of psychosocial development.

I haven't had the easiest life. I had a lot of disappointments, especially in the man category. That helps, because a lot of women center their life on who they're going to marry rather than on who they're going to be. I guess that even all of my bad experiences have been beneficial because in a way it's made me stronger.

Beverly's words provide further insight into the process of change women experience in reconceptualizing their self-identity as one capable of economic independence.

I was married at sixteen. My mother did a lot for me from the beginning because it was a very foolish marriage for me and I found that out. I was married for ten years. It took me a while to learn that I would have to depend on myself. I had another long relationship with a gentleman for fifteen years. We were like man and wife for that whole time, but I put myself on the back burner. But when he died, I was in my forties, and I was out looking for a job because I worked in his business. He never divorced his wife and I was left with nothing, I couldn't even go to the business for any references. It hurt me a great deal and it made me realize that if I want to get anywhere, if I want to do anything, I'm going to have to do it. And that was part of my realization. I think that was part of the catalyst. That it had finally come to me, I can't expect anyone else to take care of me is what it comes down to. I have to take care of myself. Part of my problem was that I was brought up to think of home, and staying home and being married and having

children and staying home and that my husband was going to support me.

Change from a Longitudinal Programmatic Perspective

Each of the four successive components of the practical nurse training program demanded an increasingly higher level of cognitive and psychosocial functioning from the program participants. To capture key elements of the developmental process, a subset of two study participants served as a cohort grouping for each of the four distinct program components. The unfolding of the developmental process among each of the study participants is captured in the "individual voices" of the four cohort groups as they progressed through the four distinct program components: the Patient Care Assistant (PCA) Training/PCA Employment (I); the Developmental and Academic Coursework Sequence (II); the Licensed Practical Nurse Training (III); Employment as a Practical Nurse (IV).

After completing the initial eight week Patient Care Assistant Training component (I), Janet, a thirty-six year old divorced mother of four teenagers, describes the unfolding of her own psychosocial growth and its positive impact on her children.

I'm a lot calmer, believe it or not. I mean I'm always rushing around, but the kids have said it, I'm a lot calmer. The kids say, this is good for you, ma. I noticed it too. I feel more secure inside, more confident. You know I could walk into a place now. My friends notice it too.

Kathy, a twenty-five year old single parent of two children, having also completed the initial Patient Care Assistant Component of the program, gives voice to the empowering changes she recognizes in herself from both a cognitive and psychosocial perspective.

I've changed a lot. I've learned a lot about people, personalities--everyone is different. When you're growing up you're judgmental, but that's not really the way you should be or the way it is really. I mean I can't change the world, but in myself and in the program, it made a big difference in me, as far as looking at people and me.

Kathy has begun the process of reconstructing her self-identity as one capable of economic independence and psychological autonomy.

I wouldn't let my boyfriend get in the way of me doing what I want to do for myself. Right now I'm on welfare, I do what I do, I'm on my own. Maybe once I get what I want, maybe then I might get married, when things are right.

Having completed the second program component, the prescribed Developmental and Academic Coursework sequence (II), is Angela, a thirty-three year old Hispanic mother of three boys ages four, ten, and eleven. Reflecting on the past year of her program participation in which she has successfully completed the Patient Care Assistant (PCA) Training program, become gainfully employed as a PCA in an extended care facility, and completed a developmental math course and a college level psychology course, Angela is able to reflect upon the psychosocial and cognitive changes she

has experienced and the positive impact these changes have had on her life.

Yes, I think I've changed because I know that if I want something bad enough, I know I can get it. The program taught us that there is positive, that there is good in all of us. We just have to stop being afraid. The program has changed my boys and it has changed me. I have been able to deal with them with more patience. I really have. I also stress the psychology part, we learned about emotions in the course. It was all so helpful. The course has helped me deal with things, it has helped me be a lot more confident. It's helped me communicate better with people. It's helped me look you straight in the eye and say, yeah, I'm gonna make it!

Angela views her successful completion of the second program component as an important step in reaching her goal of becoming a licensed practical nurse -- a goal that previously had been outside her realm of possibilities.

I would not have ever applied to the LPN school without the PCA. Without the PCA I would not have known how to get into nursing or LPN school. I don't think so, because I would not have really known how, you know. It was a field that was out of the way that I was from before. I mean if I wanted to be a secretary, I could do it, but nursing was way out of reach. I mean I would not have even known how to begin. So this program gave me a better foundation to step up.

Also in the second program component is Lisa, a thirty-one year old, twice divorced mother of three children ages eighteen months, eight years old and ten years old. Lisa, having successfully completed the Patient Care Assistant Program, is currently employed as a homemaker/health aid, and has recently completed a developmental reading course.

Expressing both pride and incredulity with her ability to achieve intellectually, Lisa's remarks provide insight about the positive impact her cognitive gains have had on her psychological growth.

I never read before. Like I read magazines and newspaper articles, but I could never read books because I just couldn't read them all the way through and keep my attention 'cause I read too slow. Now I've actually finished reading a book. I'm reading faster, I'm more knowledgeable. People don't realize what it is, even me, just how important reading it. Actually I am surprised at myself, that I could do it. It's something I had a hard time in school with, English, and that always made me feel incompetent about doing a lot of things. I was the type, that I used to get depressed. But I've become much more independent. I feel much better about myself. It's very scary when you start out...when you're left alone with children. You just can't sit home and pout about it. You just gotta get up on your feet and say, I'll do what I have to do. That's what you have to do. I stayed with my husband because of finances. I can do it on my own. I'm very determined now.

Although Lisa realizes that the academic gains she has made in reading are significant, Lisa's low score on the recent LPN admission test will require her to take additional coursework in the sciences prior to consideration for entry. Lisa's words reveal her remaining psychological insecurities.

My self-esteem is starting to go down, like I'll never make it, you know. I didn't know nothing about science. I didn't have much science in high school.

In addition, Lisa is still working through the ambivalence she feels about assuming the new roles of student and worker, along with her mothering role, and reveals her thought process in coming to terms with her decision.

I have to get over this guilt trip, that you feel like you're giving up your children. That you're just shoving them aside, but you have to reinforce them and let them know what you're doing and they have to be supportive. It's hard with children, but I think that children are smarter than we give them credit for. I'd be doing it for them, as well as myself. They're helping me, they're the ones that if it wasn't for them, I couldn't do it, kinda.

As the study participants transition into the third program component, the intensive ten month Licensed Practical Nurse Program (III), they clearly recognize the value of the psychological strength and academic background which they have gained through their participation in the previous program components. Natalie gives voice to her psychosocial development which has become apparent during the past year. Her ability to reconceptualize her self-identity as one which is separate and independent of male support is clear.

A lot of things have changed. A lot of things. I feel more pride in myself. That I'm on the right track, that I'm getting to where I want to be, and that I'm a lot more serious about a lot of things. Before it was just yahoo. I take life a lot more seriously now. I have things to look forward to, where before it was like well, I guess I can go to Newport and meet a nice rich guy and not worry about it, you know.

Natalie's voice indicates the self-sustaining nature of her current academic progress.

I don't even know what gets me out of bed in the morning. Sometimes I am in the car, is this me? I have to touch myself. Why am I doing this to myself? Is this really me, am I really on the way to school or am I dreaming it? I have dreamed that I was in school and I wake up and say, wow, I'm still here, I thought I was in school. And I get up in the morning and rush around like a mental maniac. But I don't know what it is. I guess it's because once I start something I have to finish it. Some people dropped out in the first month, they were good people and they would have made damn good nurses. But this program, it's hard. The program tests you to the limits. It gets me mad and then I am up even earlier, and then I'm even more chipper. Yeah, I'm ready, go ahead throw it at me.

Rose who also had reached the licensed practical nursing component, had left school in the ninth grade and had significantly more educational gaps to remediate in order to sustain her progress. Rose also recognizes the cumulative aspects of her cognitive growth and the positive psychological impact which successful completion of the prior program components has had on her current success.

I would be having a very hard time right now without those courses. They helped tremendously because if I was to walk into that classroom, you know, knowing just what I knew before I took those classes I would have been completely lost. But I got a 4.0 on the Reading Comprehension and Biology, so I was like proud of myself. Now I know what I'm capable of doing. I know that if I'm really interested in something, that if I put my effort into it, that I'm going to do well. It all depends on me. Right now in LPN school, I wouldn't say that I'm having a hard time, but it's not easy. One of my grades was 74.5% and for me that was depressing, because I know that I can do better. So it took me three more tests, but I got my grade up to an 80%.

From a psychosocial perspective, Rose provides evidence of considerable development. She has reconceptualized her view of her self and has declared her economic independence.

I just feel that people look at me different now. I have a good sense of pride in myself. I have confidence in myself. My mother tells me that I've changed, all the time. I don't really think that I've changed that much as a person, I'm still the same person. I just think that my values are a little bit different with life. I know that I have responsibilities and that I have accepted the responsibilities that I have. I want to be able to support my children and give them a decent way of life. You know what I'm saying? I don't want to have to depend on a man in order to do that. So, I figure, if I have my independence first, then if I find a man and fall in love, then I can be happy with my life. I don't want to have to feel that my tie to that person that I'm going to marry and love is a tie that I'm stuck under. I don't want to be stuck in a situation and not be able to get out of it. I don't want to have to stay in a relationship only because I'm financially dependent. Right now, being on AFDC doesn't really bother me because I'm doing it and I'm bettering myself. I'm using the system for my advantage, and I'm going to better my life and my children's life, so it doesn't bother me. Whose going to care more about you than you? Nobody!

Independent of welfare support and economically self-sufficient is Debra, a thirty-five year old divorced woman with two teenagers. Debra had required some level of welfare support for the past ten years, although during that period she had been employed intermittently in various unskilled jobs. Having completed all four program components in just under two years, Debra has now become fully independent of welfare support by working as a licensed practical nurse,

full-time at one nursing home and part-time at another. Now that she is economically self-sufficient, she like other women of this study, expresses her readiness to marry as an equal partner in a relationship and has plans to wed within the next two months. She and her future husband are both working long hours to accumulate the down payment for their planned home purchase. Looking at her change experience in retrospect, Debra succinctly sums up her transformation:

When I completed the program it was like I had finally fulfilled a part of my life. I've gotten further in my life and I've accomplished another goal. It gives you a good feeling about yourself.

Also completing all four program components in just under two years is Beverly, a divorced, forty-nine year old mother of three. Having left school in the eighth grade, Beverly married at the age of sixteen. After her divorce fifteen years later, Beverly returned to evening school to acquire a high school diploma. Requiring some level of welfare support while raising her children and being employed in various low-paying positions as a clerk and later as a home/health aid, Beverly is now employed as a licensed practical nurse in an extended care facility and has become independent of all welfare support.

Beverly is the oldest of the study participants and has the fewest parenting responsibilities with her last child having completed high school. At this stage of her life, Beverly is able to devote tremendous energy to her own self-

development needs and is in the process of pursuing her long term career goal of becoming a registered nurse. Planning to enter a two year associate degree nursing program within the next two years, Beverly is in the process of completing the prerequisite college level courses she requires by attending evening classes, while working during the day. As Beverly looks back over the many changes she has made in her life during the past three years on her way to self-sustaining, economic self-sufficiency she shares:

If I were given the chance to change one thing in my life it would be to complete my education before I married or had my children. When I was younger I never realized how important it was to get a good education. Having the responsibility of raising three children and trying to complete my education has been a difficult task. It was not an easy life for my children and I had to try to keep my family together and get an education so I could get a job to support us all. Part of my realization was that I can't expect anyone else to take care of me is what it comes down to. If I don't take care of myself, nobody is going to do it. I'm still looking for more, bettering myself really. I feel better about myself now, of course. And every time that I have taken a step in the program it has been better for me. And that's what keeps you going because you see yourself accomplishing something.

Section Three: A Process Model of Change: From Welfare Dependency to Self-Sustaining Economic Independence

Upon careful scrutiny of the myriad of data findings, interrelationships among some of the thematic groupings emerged as connected and part of a larger process. Resulting

from a continuous process of data synthesis and distillation of the major conclusions of the study, a four stage "process model of change" was generated from the data findings. This process model captured the key external and internal elements involved in the transformation process of the welfare dependent women who entered the Career Access Program in Nursing in order to achieve economic self-sufficiency.

This "process model of change" was developed within the backdrop of a highly structured program setting where participants' needs and concerns had been carefully analyzed. The "change model" which emerged is characterized as invariant and domain specific and is comprised of the following four stages: Precondition Stage, Transitional Stage, Reconstruction Stage, and Independence Stage. Each of these discrete stages of the model delineates specific threshold issues which require resolution prior to moving onto subsequent stages. Figure 1 portrays this process model of change.

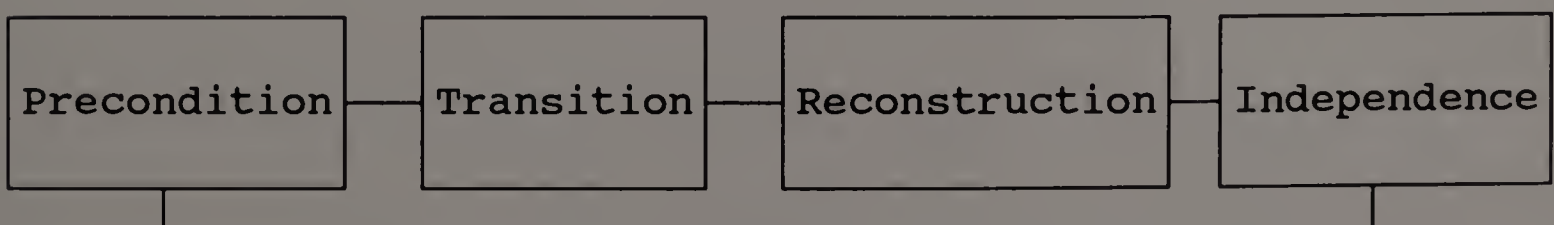


Figure 1

Process Model of Change

The first stage of "Precondition" requires the establishment of an "external infrastructure" which is able to support a welfare dependent mother's efforts to become economically independent. The components of this external infrastructure include health of the welfare dependent mother and her child(ren), accessible and affordable child care, reliable transportation, adequate housing, high school diploma or equivalency credential, and an intergenerational connectedness with a parental figure or other supportive "surrogate" relationship.

The second stage of "Transition" requires the welfare dependent mother to develop an "internal infrastructure" in which her self-worth and sense of agency are cultivated through the acquisition of newly acquired skills and knowledge related to her chosen profession. Highly supportive educational environments which respond to the gender preferred learning needs of women are more likely to promote participant success. Recognizing the incremental nature of psychosocial and cognitive change is vital and provides a sound rationale for promoting longer term structured educational intervention programs in order to bring about internal change which becomes self-sustaining.

The third stage of "Reconstruction" requires welfare dependent mothers to build upon their newly developed sense of agency and self-worth and reconceptualize their self-identity as one capable of economic independence and psychological

autonomy. Accumulated successes within the academic environment nurture cognitive and psychological growth and promote a sense of empowerment. This empowerment is a primary "building block" to the requisite framework for internalizing a self-identity as a competent professional with a primary wage earning capacity.

The fourth and final stage of this process model is "Independence," which is the resultant personal transformation of welfare dependent mothers from both an external and internal perspective. Successful completion of the tasks required of the prior three stages, provides external corroboration of success and allows welfare dependent mothers the ability to catapult themselves into the social and economic mainstream of society. This stage of the change process is characterized by ownership of growth and internal self-monitoring. Through the acquisition of skills and knowledge that are rewarded with breadwinner wages external economic autonomy has been achieved and through empowerment and fundamental changes in self-identity internal psychological autonomy has been assumed.

Recognition of the fragile and tenuous nature of this initial stage of independence is critical in light of the fact that issues which were successfully resolved at the "Precondition Stage" may suddenly reappear and jeopardize this newly found stage of "Independence." Reliable transportation may become unreliable due to an exorbitant car repair bill, a

child's good health may suddenly deteriorate, a nurturing mother may die unexpectedly. The importance of building strong systems of support throughout each step of the change process remains critical to maintaining this final stage of "Independence." However, regardless of their inability to control many of the "external infrastructure" issues that may negatively impact their lives, welfare dependent women who reach the final stage of "Independence" have attained a level of internal cognitive and psychosocial functioning that will remain self-sustaining so that "precondition issues" that might reappear will be temporary in nature.

Summary

Clearly, the findings of this study indicate that a woman's socially controlled subordinate role has a profound impact on a welfare dependent mother's ability to reconceptualize her self-identity as separate and individuated from a man and negatively affects her psychological preparedness to become economically self-sufficient. The ideology of "patriarchal necessity" which is operationalized in men's need to devalue and control women is mirrored in national social welfare policies which undermine the ability of welfare dependent mothers to become economically self-sufficient. Policies influenced by "patriarchal necessity" insure that welfare dependent women maintain a lifestyle of poverty status; that welfare dependent women are forced to work in the

underground job market to provide for their family's basic necessities, thereby maintaining their invisibility and exploitation; and that welfare dependent women's options for education, housing, transportation, health care, and child care remain limited. All of these insidious practices serve to continually reinforce welfare dependent women's devalued position in society and negatively impact their ability to achieve self-sustaining, economic self-sufficiency.

C H A P T E R V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Introduction

Chapter Five is divided into seven sections. The first section provides a summary of the overall study. The second section analyzes the primary research findings and provides an in-depth analysis of the four stage "process model of change" along with a discussion of its relationship to Lewin's (1951) field theory approach. The third section examines the secondary research findings. In the fourth section the conclusions of the research are discussed. The fifth section presents a critique of the study design. And the final two sections consider the implications of the research in reducing welfare dependency among women and discusses recommendations for further research.

Summary of the Study

The purpose of this study was to examine the cognitive and psychosocial transformation process experienced by welfare dependent mothers seeking to achieve economic self-sufficiency as a result of their successful completion of a highly structured community college academic and technical skills preparation program. To realize their goal of welfare independence, the study participants enrolled in the Career

Access Program in Nursing (CAP) which offered a progressive hierarchy of career ladder training along with the requisite academic coursework needed to become employed as licensed practical nurses.

The overall study was guided by the following research question. What are the cognitive and psychosocial characteristics which comprise the transformation process experienced by welfare dependent women who become economically self-sufficient as a result of their successful completion of a structured academic and career preparation program? Integral to the primary research question was a number of interconnected gender related subquestions specific to female identity development which warranted examination. These interrelated research questions addressed the potency of gender, class, and socioeconomic status on issues of female dependency and empowerment; the relationship between age and stage and its influence on developmental patterns of welfare dependent mothers; and, the impact of gender related affiliation and interdependence issues on the transformation process of welfare dependent mothers.

Research on the cognitive and psychosocial characteristics of welfare dependent women who have pursued academic and career related training has been sparse. To date, the vast majority of research has focused on the cost effectiveness of specific welfare-to-work programs and most research on female welfare dependency has analyzed welfare

dependent women from an individual pathology perspective. Virtually no longitudinal research has been conducted which examines the elements involved in the transformation process experienced by welfare recipients engaged in an academic and career related training program which leads them to self-sustaining, economic self-sufficiency.

In light of the absence of research related to the transformation process experienced by welfare dependent mothers who successfully complete collegiate level career preparation programs, the grounded theory method was selected for this study. Use of this qualitative methodology best addressed the shortcomings of existing research while enabling the researcher to gain a broad understanding of the primary research question at hand and a consideration of the interrelated issues. According to Stanitis (1986) "minimal scientific knowledge of a phenomenon invites the initial research of the area to be generative and lack of previous scientific inquiry requires methods geared to identification of research questions and potential hypotheses for further scientific investigation" (p. 181). Grounded theory methodology was applied in this study to facilitate the expansion of knowledge related to the transformation process of welfare dependent mothers and generate hypotheses to reduce welfare dependency among women.

Grounded theory was generated through the method of constant comparative analysis. This process of data

collection and analysis was ongoing and recurrent throughout the research portion of the study, with the data shaping the emerging theory as it became continuously more focused. The data in the context of the research provided the basis from which the theory eventually emerged. The grounded method of constant comparative analysis began with a preliminary review of the related literature and a pilot study of two welfare dependent women who had successfully completed the structured academic and career preparation program, became employed as licensed practical nurses, and as a result, had achieved self-sustaining, economic self-sufficiency. The literature review and the input of the pilot group shaped the interview protocol.

Primary Study Findings

Genesis and Analysis of the Process Model of Change

The most significant outcome which emerged from the study findings was the development of a "four stage process model of change" which accounts for both the internal and external cognitive and psychosocial manifestations of change which were experienced by the study participants. This "process model of change" emerged from a rigorous process of distillation of the complex, yet seemingly interrelated study findings. This "model of change" captures the self-transformation experience of the welfare dependent women who participated in this study and depicts their interrelated

growth in psychosocial functioning and cognitive development which became cumulative over each of the four successive program components. Figure 2 depicts the interrelationship of the "four stage process model of change" with each of the four sequential program components of the Career Access Program in Nursing.

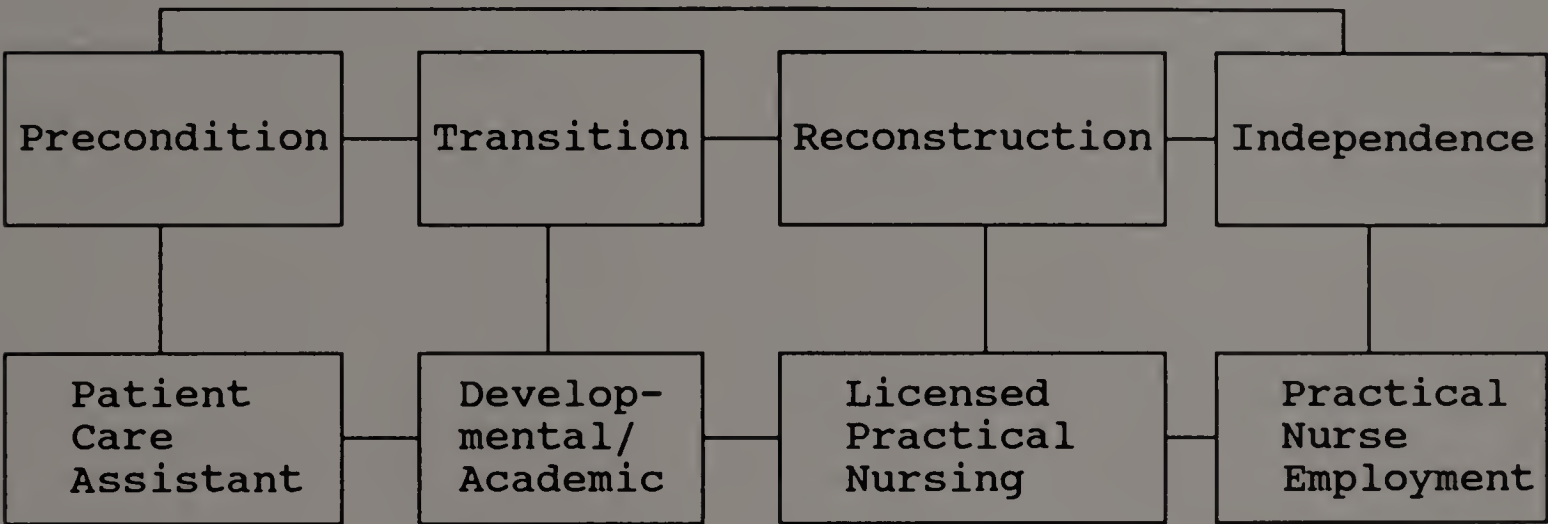


Figure 2

Interrelationship of the Process Model of Change with the Components of the Career Access Program in Nursing

As depicted in Figure 2, participants begin the change process at the "precondition stage" which is the first component of the "process model of change," and is subsumed within the first academic and skills training component of the Career Access Program in Nursing, the Patient Care Assistant Training. Prior to entry into this first program component the external infrastructure of welfare dependent women's lives must support their initial steps to move towards economic self-sufficiency. Basic needs such as child care, transportation,

housing, family health, and basic educational skills must have been adequately resolved. As a prerequisite for establishing economic self-sufficiency goals, welfare dependent mothers require a manageable level of "role strain" between their primary role as mothers and their proposed roles as students and employees. The external infrastructure of home life must be able to support their efforts before women are able to allow themselves "psychological permission" to address individual self-development needs and related issues of economic self-sufficiency. Until mothers are secure with the proposition that their children's health, safety, and welfare will not be jeopardized by their working full-time, they are unable to commit themselves fully to the world of work or to earnestly pursue career preparation goals.

The status of Stage One "precondition issues," rather than a welfare dependent women's chronological age, is the better predictor of a woman's readiness to move towards economic self-sufficiency. Stage One "precondition issues" provide a clear benchmark for policymakers and program administrators to use in assessing and developing client readiness and present evidence to support the inappropriateness of programs which mandate welfare dependent mothers' participation without first successfully resolving external infrastructure issues.

From a program perspective, the ambitious goals of the eight week, intensive Patient Care Assistant component have both external and internal dimensions. Confirming the

durability of each participant's external infrastructure and assisting her with the resolution of vexing problems is vital to building confidence in this structure's strength which is required to support long term personal and career goals.

In combination with addressing external infrastructure issues, internal infrastructure are confronted by creating a learning environment which provides pedagogical opportunities for self-development. To provide for internal development, the philosophy and orientation of the Career Access Program in Nursing support the building of a "community of learners." Within this "community of learners," each program participant is accepted and respected, as well as provided with an external confirmation of her capacity for intelligent thought and ability to master the knowledge, skills, and tasks that will eventually provide her with the external tools required to earn a family wage. The program's experiential approach to learning instills within each participant that she is the active center of learning, rather than being a passive observer of the process.

Affirming Belenky's (1986) belief that "confirmation and community" are prerequisites of development (p. 194), this highly structured, supportive environment evaluates individuals' progress within their own contextual "living and learning space," rather than by setting impersonal standards of achievement which dictate success and failure. A collaborative, team approach is emphasized within the

laboratory and clinical settings, and participant evaluations are based on individual progress, rather than on a standardized grading curve or other type of external measure.

The second stage in the "model of change" is entitled "transition" and within this stage the process of growth and self-discovery are reinforced. The outcomes of this stage of development evolve out of the successful completion of the tasks of the second component of the Career Access Program in Nursing, the individualized, prescriptive Developmental and Academic Coursework sequence. As study participants progress through the second of the four sequential program components, each learning success contributes to incremental growth in both the cognitive and psychosocial domains. Successfully completing coursework in English, math, reading, science, and psychology provides study participants with heightened feelings of intellectual mastery and psychosocial competency through their skills acquisition, academic achievements, and workplace contributions. As study participants internalize these cumulative successes, formative improvements in agency and authority reshape their identity development in a positive and progressive direction. This increased sense of agency is transferred into other role responsibilities, such as mothers, homemakers, and workers. Improved psychological state and strengthened cognitive capacity provide the foundation for a successful transition into subsequent program components.

In Figure 2, "reconstruction" represents the third stage of the change process and is subsumed within the third component of the Career Access Program in Nursing, the Licensed Practical Nurse Preparation Training. The major requisite psychosocial task of this stage is to bring about internal self-transformation and "reconstruct" one's self-identity as capable of economic autonomy and psychological independence.

Despite seemingly overwhelming obstacles, this third complex developmental stage becomes the critical underpinning of a welfare dependent woman's drive to persevere and propels her towards the successful fulfillment of established personal and career goals. The arduous demands of this highly intensive learning experience provide participants with both a physical and psychological "outbound experience" where their inner capacities are continually being expanded, tested, and confirmed. Successful completion of the licensed practical nurse component not only signifies entry into a profession which encompasses the external manifestations of change: economic security, career mobility, and social status, but more important, becomes an extraordinarily important earned "rite of passage" for welfare dependent mothers.

In Figure 2, the fourth and final stage of the "process model of change" is represented by "independence" and is the task of the fourth component of the Career Access Program in Nursing, Employment as a Practical Nurse. This final stage of

the self-transformation process is the internalization of the various external changes involved in becoming a licensed practical nurse, as well as the internal psychosocial and cognitive developmental changes which have taken place. At this final stage of the process, welfare dependent women are able to speak in an "authentic voice" about the journey they have undertaken in reaching their personal and career goals and are able to express the "personal empowerment" which successful program completion has instilled within them. They view themselves as both economically and psychologically autonomous and are able to move into the mainstream of society.

This "four stage process model of change" captures the internal and external transformation aspects of the developmental process which were generated from the study findings; however, other notable interrelated study findings which are pertinent to the themes framed within the literature review section are worthy to note and will be discussed in the sections which follow.

Relationship of Field Theory to the Process Change Model

In constructing the "process model of change" to describe the transformation process of the study participants, the researcher revisited Lewin's (1951) field theory model which provided a larger, sympathetic framework to account for the interactive process of development as it manifested itself among the study participants. Within Lewin's (1951) conceptual representation of reality, the mutual interdependence of

behavior, the person, and the environment is acknowledged. Lewin (1951) understood that behavior (b) and subsequent development are a function (F) of the person (P) and of her environment (E), and represented these interconnections mathematically as, $B = F(P, E)$ or, in the inverse, that the state of a person depends upon her environment, $P = F(E)$. To understand or to predict behavior, the person and her environment have to be considered as one constellation of interdependent factors. The totality of these factors, Lewin (1951) called, the "life space" of the person. This life space of the individual is both the person and her psychological environment.

Development, according to Lewin (1951), is a process of increasing "differentiation" both of the person and of the psychological environment, increasing firmness of boundaries, and a more complicated network of hierarchical and selective relationships among the tension systems (Hall & Lindzey, 1970). Recognizing that nonpsychological facts can and do alter psychological ones, Lewin (1951) asserted that "the first step in conducting a psychological investigation is to establish the nature of the facts which exist at the boundary of the life space since these facts help to determine what is and what is not possible, what might or might not happen in the life space" (Hall & Lindzey, 1970, p. 214). Lewin (1951) understood causal relations and recognized that the "subjective psychological

world of the individual is her life-space and is influenced in a much earlier stage by social facts and social relations.

To comprehend the developmental process within the Lewinian model requires us view the external changes manifested within the study participants' behavior (B) as a function (F) of the fundamental internal changes within the person (P) with her environment (E), environment in this case is the highly structured "holding environment" imposed by the Career Access in Nursing Program. Lewin's appreciation of the influential role of nonpsychological facts on psychological ones reinforces the relevance of explaining women's welfare dependency within the contextual social reality which encompasses the cultural, historical, sociological, psychological, and physical facts of their situation. As Lewin (1951) reminds us "these facts help to determine what is and what is not possible." The application of the Lewin (1951) model may provide a useful framework for other researcher to consider.

Secondary Study Findings

Common Attributes of Participant Success

A systematic analysis of the cases under study indicates that these women shared a pattern of predispositions and social circumstances which were important contributing factors in their successful transformation process. All of the study participants had a strong commitment to work and had extensive job related experience prior to entering the practical nurse

preparation program. All, but one of these women, had considerable support from their mothers for child care, financial assistance, and emotional backing. And in addition to their mothers, these women had significant attachments outside of their nuclear families with male and female friends. And, despite the callous indifference of their local welfare departments, all of these women were able to navigate the bureaucratic obstacles and become vociferous advocates for the services they and their children required.

Predictive Value of Prior Educational Experience

Prior adolescent educational experiences proved not to be a valid predictor of expected academic performance in the program. However, study participants' current academic performance in the laboratory, clinical, and classroom did become a good predictor of future program performance. Learning new skills and tasks in the laboratory and workplace, while gaining knowledge in the classroom, promoted program participants' cognitive competencies. Increases in learning also promoted self-esteem, self-confidence, and self-efficacy which spawned continued self-sustaining growth in psychosocial functioning.

Relevance of Moral Domain to Change Process

The study's literature review section included moral development as a domain which might be of probable significance within the research results. The study's finding of most

significance within this domain resonated with Gilligan's (1983) assertion that women favor a distinct gender related mode of moral judgment. The moral values of the study participants clearly emphasized caring, nurturing, and mutual responsibility and demonstrated a "coherence of a care ethic" (Gilligan, 1983). This "ethic of care" and need for interconnection played a primary role in the study participants' choice to pursue a career in nursing. Fulfilling their commitment to caring for others through professional paid work was self-satisfying and self-promoting and served to sustain participant progress and promote motivation to progress through subsequent program components.

Themes of Interconnectedness and Affiliation

The gender orientation of interconnectedness which Gilligan (1982) and Belenky and others (1986) found important to women's ways of knowing and learning resonated throughout the study's findings. Study participants rejected educational authoritarianism, while preferring collaborative learning environments where teachers and learners constructed knowledge together and nurtured each others ideas. Instructor approachability and classroom sociability were essential dimensions which influenced the learning process. Study participants preferred teachers who they described as "friendly, warm, and supportive." Study participants easily established affiliative relationships within the classroom and organized study groups to support their preferred style of

learning. Hands-on, experiential, connected learning was the preferred learning mode of the study participants.

Not only was this gender related preference for a strong relational mode of affiliation evidenced in the classroom, it also revealed itself within the study participants' interrelationships outside of their own homes. All, but one of these women, had strong supportive relationships with their mothers and cited them as integral to their ability to succeed in the program. In addition, all of the study participants had strong connections to other family members, as well as male and female friends.

Impact of Maternal Thinking

The concept of "maternal thinking" did not emerge as a significant study finding for better understanding the cognitive development of the participants as they progressed through the career preparation program (Ruddick, 1989). Although all of the study participants were fully immersed in the mothering role as sole caretakers of their dependent children, they were unable to become self-reflective about the significance of the mothering experience in shaping their current process of growth (ways of knowing, thinking, or being in the world) in response to specific probes embedded in the interview protocol. They were able to clearly articulate the beneficial impact their academic accomplishments would have on improving their child(ren)'s lives, but they were unable, at

this stage of their development, to individuate themselves from their mothering role from a cognitive perspective.

Conclusions of the Study

The focal inquiry of this dissertation was to determine whether there was an internal dimension to the transformation process experienced by welfare dependent women who participated in a highly structured academic and career related preparation program in order to become economically self-sufficient. Clearly, the extensive array of workplace competencies and related nursing care skills acquired by the study participants were visible and measurable and could be readily identified as external manifestations of their change process. An extensive delineation of these external skill mastery competencies is included in Appendices E and F.

However, the most significant and central research finding was that internal psychosocial and cognitive manifestations of change were identified and that internal self-transformation was of greater importance in bringing about self-sustaining, economic self-sufficiency than the identified external manifestations of change. Therefore, it does not seem too strong to state that the documented external changes engendered by the Career Access Program in Nursing were necessary, but not sufficient to complete the self-transformation process of these welfare dependent women.

As the literature review proposed and the study findings confirmed, education provides cognitive, psychosocial, and economic empowerment for poor undereducated women (Coles, 1979; Stein, 1982; Stromquist, 1988). Education connects learners to the larger world and allows them to see new possibilities for themselves. As Stromquist (1988) states "one cannot teach self-confidence and self-esteem, one must provide the conditions in which they develop" (p. 13). The external structure of the Career Access Program in Nursing provided the "holding environment" which brought about internal change within the domains of psychosocial and cognitive functioning.

In light of these findings, the radical literature on the mission of the community college deserves a revisit by college program planners (Jencks, 1968; Jencks & Riesman, 1968; Karabel, 1972; Zwerling, 1976; Pincus, 1980). Community colleges currently serve the majority of this nation's poor and educationally underprepared women, and therefore, these institutions should more seriously embrace the complex process of empowerment as a legitimate goal of the educational process.

Critique of the Research Method

The major aspect of the research design which would have improved the study's validity was related to the longitudinal limitations imposed on this study. Although study participant selection provided four distinct cohort groups which were

representative of each of the training program's distinct stages, a research design which included the periodic interviewing of each study participant throughout their two to three year program participation would have provided additional insight into the transformation process. An extended longitudinal approach which included the use of pre and post cognitive and psychosocial developmental instrument measures might have served as useful validation tools.

An unintended result of researcher interest in the progress of the study participants which could be inferred by their selection and participation in the interview process may have served as a positive reinforcer to this particular group of welfare dependent mothers. During the course of the study, the volunteer participants stated that the experience of sharing their progress towards economic self-sufficiency with the researcher was very satisfying for them. Nonetheless, when examined within the context of the overall research findings, any halo effect due to researcher interest was probably insignificant.

Implications of the Study

This study examined the nature of welfare dependency among women and provided ample evidence to dispel many of the widely shared negativistic assumptions about women and poverty. The literature review provided substantive support

for the argument that welfare dependency among women is an issue of socioeconomics, not of individual pathology.

Despite the economic, social, and psychological gains which many women have made during the past two decades with the advent of the feminist movement, undereducated welfare dependent women have benefitted least. The most important and striking finding of this study underscored the importance of welfare dependent mothers successfully completing the intrapsychic task of reconceptualizing their self-identity as autonomous in order to successfully transition from welfare dependency to self-sustaining, economic independence. This finding was somewhat surprising in that even the youngest of the study participants who were only in their twenties and whose life spans were entirely within the mainstream of the feminist movement had nonetheless clung to the traditional ideals of marriage and family and fervently believed that a man would provide them with lasting economic security and an appropriate self-identity. Clearly, the ideology of "patriarchal necessity" continues to permeate the psychological reality of many women and leaves them psychologically unprepared to undertake the task of becoming economically self-sufficient.

Empowering welfare dependent women through education and career related training with the requisite tools needed to reconceptualize their self-identities as economically and psychologically autonomous has emerged from the study findings

as the vital component needed to insure positive and lasting change in the lives of welfare dependent women. In light of the lack of significant long term educational opportunities for welfare dependent women which are structured to promote lasting change, as the literature review section indicated, it is not surprising to find that marriage, rather than from the economic returns of her own work efforts, is the most common way for a woman to become independent of welfare (Ellwood, 1988). The conclusion being, that marriage, allows a welfare dependent woman to preserve her dependent self-identity which is firmly rooted within the existing social reality. However, it is important to acknowledge, that the social reality required to support a reconceptualization of self-identity is not yet embedded within our existing social structure; and therefore, one can not minimize, nor underestimate, the effort involved in undertaking the arduous task of reconstruction of self-identity by welfare dependent women.

In light of the existing socioeconomic and political reality, assisting welfare dependent mothers to transform their self-concepts remains obstructed at the operational stage. Without providing access to education and career related training, helping undereducated welfare dependent mothers to view themselves as economically capable of taking care of themselves and their child(ren) within the existing workplace structure belies the current socioeconomic reality. As the literature review indicated, new industrial changes have

transformed the workplace in dramatic ways which have had an especially negative economic impact on the ability of undereducated, unskilled women to earn meaningful wages (Sidel, 1986; Rosen, 1987). Therefore, in lieu of economic, political, and social policies which support economic self-sufficiency among undereducated welfare dependent mothers, the introduction of alternative strategies which mitigate the existing social reality is vital. As indicated by the research findings, one such viable strategy is to provide access to collegiate education and career related training for welfare dependent mothers. As demonstrated by the success of the study participants, access to postsecondary career preparation programs coupled with requisite support services is a viable means to catapult welfare dependent mothers into the socioeconomic mainstream of society. Clearly, substantive investments in long term career preparation at the college level can lead to long term economic gains for welfare dependent mothers who are able to become productive, tax-contributing workers.

Recommendations for Further Research

The results of this study provide a basis for further research to address the multi-dimensional issue of welfare dependency among women. Relatively neglected additional areas of research worthy of exploration can be categorized into three interrelated areas of inquiry. How can existing knowledge

about female developmental theory be integrated into an intervention approach to reduce welfare dependency? What further research in the area of gender related issues is needed to better understand welfare dependency among women? And how might available research findings best be utilized to shape public welfare policy?

As indicated by the study findings an important psychosocial developmental task for welfare dependent mothers is that of reconstructing their self-identity as one economically independent of male support. These findings suggest the benefit of intervention strategies which emphasize an empowering approach for women to replace existing intervention strategies which emphasize submissiveness and dependence. Developing educational intervention models which impart work related skills in concert with imparting psychological strength and autonomy is an important area for researchers and program planners to consider. In addition, future researchers might consider developing a more finely grained assessment of the epistemological, psychosocial, and cognitive dimensions presented in Appendix F: Analysis of the Skill Mastery Requirements and the Application of Developmental Theory to Program Participant Outcomes.

The finding that welfare dependent mothers required the ongoing support and involvement of their own mothers to take the steps to becoming economically self-sufficient reinforces the significance of the gender related theme of

interconnectedness and raises the question of the suitability of developing a support system of "surrogate mothers" for welfare dependent mothers who lack such support. Such support may be a critical intervention strategy to assist welfare dependent mothers who have been unable to take the initial steps towards economic self-sufficiency. Would intervention patterns that build upon the importance of affiliation and provide for networks of social support within the church, community, and schools improve the environment of readiness for women who have experienced long term welfare dependency?

Comparative studies which examine the long-term effects of collegiate level training versus other types of job preparation on welfare dependent women's economic self-sufficiency are vital to ensuring that limited monetary resources are spent judiciously. Do the developmental gains of welfare dependent mothers who participate in college level training promote greater self-sustaining, economic self-sufficiency than participation in short-term, nonacademic training? What level of cognitive and psychosocial developmental gain is needed to achieve economic self-sufficiency to avoid the cyclical intermittent welfare dependency of mothers which is well-documented nationally?

Another important area for further research is consideration of how the nonfinancial incentives which compel welfare dependent mothers to work despite little economic gains might be combined with real economic incentives to stem the

growth of welfare dependency. Approaches which combine the internal psychological desire for self-development with the external incentive of an improved economic situation may prove to be progressive intervention strategies to address welfare dependency among women.

And finally, research is needed which examines the lives of welfare dependent mothers who are considered "long term," defined as requiring welfare support for ten years or more, to discover whether this study's proposed process model for change might be useful in developing intervention strategies to assist this population of women achieve self-sustaining, economic self-sufficiency.

APPENDIX A

INTRODUCTORY LETTER TO POTENTIAL STUDY PARTICIPANTS

Bristol Community College
777 Elsbree Street
Fall River, MA

Dear Student:

My name is Ruth Sherman and I am a researcher who is very interested in learning about the experience of women who return to school to prepare for practical nursing careers. I would like to have the opportunity to talk with you about your experience of returning to school and how this experience has impacted your life.

May I call you at your home to tell you about this research project? If you are interested and willing to talk with me about your experience in returning to school to become a nurse, I would like to plan a convenient time for you to meet with me.

Though I would greatly appreciate your allowing me to call and introduce myself and my study to you, you are under no obligation to do so. Your decision to participate or not participate in this study will in no way affect your ongoing participation in the Career Access Program in Nursing. If you do agree to my calling you and then decide that you are not interested in any further participation, you are under no obligation to continue. However, I do hope that you will be interested in talking with me.

Very truly yours,

Ruth Sherman
Work Phone:
(508) 678-2811, ex: 270

APPENDIX B

INFORMED CONSENT FORM: AGREEMENT TO PARTICIPATE IN THE STUDY

I agree to participate in the research study conducted by Ruth Sherman, M. Ed., a doctoral candidate in the School of Education at the University of Massachusetts, Amherst, MA. I understand that the proposed research will study the change process experienced by women involved in academic preparation and training to become practical nurses.

I understand that my participation in this study will not affect my participation in the Career Access Program (CAP) in any way. I understand that during my enrollment in CAP, I will participate in a series of interviews with Ms. Sherman and that during each interview I can choose to answer or refuse to answer all questions at my discretion. I understand that I can terminate my participation in this study at any time without question and that my participation in the Career Access Program in Nursing will not be affected in any way.

I have been assured that what is discussed in each interview will remain confidential and that all information collected in this study will remain confidential. I have been informed that my privacy will be protected and that in the final research report my name and identifying characteristics will remain anonymous.

Ms. Sherman has answered all my questions about the study and has encouraged me to contact her if I have additional questions about the study during her working hours at (508)678-2811, ex: 270. I understand that a report of the study results will be made available to me upon request.

Signature of Participant

Signature of Researcher

Date

cc: research participant

APPENDIX C

INFORMED CONSENT FORM: USE OF AUDIOTAPES

I consent to the audiotape recording of research interviews conducted by Ruth Sherman. I understand that these recordings will be used only by Ruth Sherman for the purposes of the research. She has informed me that the contents of the recordings will remain confidential and that my identity will remain anonymous in all written transcripts of the recordings in the research report.

Signature of Participant

Researcher

Date

cc: research participant

APPENDIX D
GENERAL INTERVIEW GUIDE

Conduct of the Interview: The researcher will refresh the participant about the purpose of the study, answer all questions, and have the participant sign the informed consent forms. The interview will be partially structured, with the researcher presenting the following topics during the course of the interview.

1. Pertinent Historical and Structural Data of the Participant.

Age, marital status, number of children and their ages
Past education and experience

Work history: satisfactions of work, what she values about work, attitudes towards work

Family background: mother's and father's education and work experiences

How she manages her single parenting responsibilities

The circumstances that led her to becoming dependent upon welfare. Length of time on welfare.

2. Motivation for Returning to School

What were the internal forces/external forces which motivated you to return to school?

Was your return to school precipitated by any major life event? If so, describe.

Who or what helped you to make the decision to return to school?

Why did you chose to enter the field of nursing?

How far do you expect to go in the program? What do you see yourself doing five years from now?

3. Intrinsic Conditions that Helped or Hindered Success while in the Program.

What about yourself helped you to succeed in the program?

What interfered with you doing better?

What would have helped you in overcoming the hindering conditions?

What things surprised you about yourself?

4. Conditions in the Educational Environment that Helped or Hindered Success while in the Program.
What conditions in the educational environment helped you to succeed?
What conditions hindered you?
What would have been more helpful?
When the going got rough, what helped you the most?
Of all the things that hindered you, which were the most problematic?
5. Changes as a Result of Successful Program Completion.
Is the way you see yourself now any different from the way you saw yourself prior to entering the CAP program? Describe.
Where in your life do you see the most notable changes?
What do you think led to these changes?
What were the major turning points in this process for you?
Has your sense of yourself as a woman changed at all since you enrolled in the CAP program? Describe.
How do you see yourself changing in the future?
What will your life be like ten years from now?
Do you see yourself becoming independent of welfare some time in this process? Explain.
6. Relationships and Support Systems
What are the important relationships in your life?
How are the important people in your life reacting to your entering this program?
Tell me about your most supportive relations and your least supportive relations.
7. Role as a Woman and as a Mother
How do you think about yourself as a woman having to juggle all these multiple roles?
Do you think things are different for women, than for men? If so, how?
How has being a mother changed you?
What skills have you developed as a mother that have helped you gain a sense of competence or confidence?

APPENDIX E

CAREER ACCESS PROGRAM CLINICAL EVALUATION FOR
FOR PATIENT CARE ASSISTANTS

NAME: _____

HOSPITAL: _____

OUTSTANDING	4	POOR	1
GOOD	3	UNACCEPTABLE	0
FAIR	2		

DATE

--	--	--	--	--	--	--	--

1. Checks Assignments							
2. Organizes equipment effectively							
3. Uses equipment safely							
4. Explains procedures to patient							
5. Drapes/Screens patient appropriately							
6. Translates theory into practice							
7. Follows procedures without difficulty							
8. Demonstrates proper use of body mechanics							
9. Provides patient with a safe environment							
10. Organizes assignment to best meet patient's needs							
11. Accuracy of care							
12. Effort							
13. Seeks assistance when needed							
14. Leaves work area neat and clean							
15. Completes assignment in reasonable time							
16. Performs patient care tasking in caring manner							
17. Communicates effectively and respectfully							
18. Keys charge nurse/team leader in a timely manner							
PERSONAL QUALITIES							
19. Attitude							
20. Punctuality							
21. Dependability							
22. Appearance ie grooming, uniform, shoes etc...							
23. Works well with co-workers							
24. Ability to accept constructive criticism							
25. Initiative							
26. Charts appropriately (if applicable)							

COMMENTS:

GRADE

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APPENDIX F

ANALYSIS OF THE SKILL MASTERY REQUIREMENTS AND THE APPLICATION OF DEVELOPMENTAL THEORY TO PROGRAM PARTICIPANT OUTCOMES

PROGRAM COMPONENT I: PATIENT CARE ASSISTANT

DESCRIPTION: Intensive 8 week, 220 hour training program: 80 didactic hours, 40 hours of laboratory education and 100 hours of clinical practicum at a hospital site. Upon completion, participant begins paid PCA employment.

OVERARCHING TASK: Adapt to complex demands of training/education environments (hospital and school) and integrate new learning for transition from student/welfare recipient to patient care assistant/wage earner.

SKILL MASTERY: COGNITIVE DOMAIN

- Develop study skills, problem solving skills, time and home management skills.
- Develop ability to organize work related duties.
- Master academic and technical skill requirements.
- Anticipate and resolve potential barriers to successful program completion, such as child care issues, transportation, and finances.

SKILL MASTERY: PSYCHOSOCIAL DOMAIN

- Develop personal and career goals related to becoming a practical nurse.
- Develop interpersonal skills for relating to students, instructors, and hospital clinical staff.
- Adapt to requirements of hospital and school cultures.
- Balance multiple roles of student/parent/homemaker.
- Establish priorities among conflicting demands and develop stress management skills.

DEVELOPMENTAL THEORY APPLICATION

- Facilitate movement from concrete to formal operations and from dualism to relativism through heavy reliance on structured, hands-on, problem-oriented modes of instruction, a personal classroom atmosphere, and peer centered group work in the classroom, clinical and laboratory situations (Piaget, Perry).
- Structure learning environment to provide challenges and supports (Sanford).
- Facilitate identity resolution by assisting program participants to clarify interests, skills, and attitudes by providing experiences which aid the individual to make commitments (Piaget).

PROGRAM COMPONENT II: DEVELOPMENTAL/ACADEMIC COURSEWORK

DESCRIPTION: Individualized prescriptive sequence of coursework to remediate existing academic deficits prior to entry into licensed nursing program. Typical coursework consists of Reading, Writing, Algebra, Chemistry, Biology, and Psychology.

OVERARCHING TASK: Remediate academic deficiencies and undertake college level coursework.

SKILL MASTERY: COGNITIVE DOMAIN

- Transfer skill of anticipating and resolving potential barriers to successful program completion, such as child care issues, transportation, finances.
- Transfer home and time management skills in areas of childrearing, budgeting, homemaking, and scheduling.
- Master prescribed developmental/academic coursework (qualitative increase in skill complexity).
- Transfer study and test taking skills (qualitative increase in skill complexity).

SKILL MASTERY: PSYCHOSOCIAL DOMAIN

- Commit to long range academic and career goals.
- Establish priorities among conflicting demands.
- Balance effectively multiple roles of student/parent/homemaker/worker.

DEVELOPMENTAL THEORY APPLICATION

- Mastery of college coursework in combination with increased skill mastery related to Patient Care Assistant employment experience promotes cognitive development in the areas of problem-solving and critical thinking skills along with increasing psychosocial development.
- Increased self-esteem, self-confidence, and self-sufficiency, and a shifting locus of control from external to internal (Erikson).
- Foster positive self-identity through meaningful achievement (Erikson).
- Documented links between self-concept and academic performance (Chickering).

PROGRAM COMPONENT III: LICENSED PRACTICAL NURSE PROGRAM

DESCRIPTION: Complete intensive ten month licensed practical nursing program.

OVERARCHING TASK: Integrate prior academic learning and Patient Care Assistant nursing practice experience to maximize licensed practical nursing training experience.

SKILL MASTERY: COGNITIVE DOMAIN

- Master academic and technical skills related to successful completion of the practical nursing program (qualitative increase in skill complexity).
- Transfer previously learned study and test taking skills.
- Transfer previously learned skills to anticipate and resolve potential barriers to successful program completion, such as child care issues, transportation, and finances.
- Transfer previously learned skills of home management including childrearing, budgeting, homemaking, and scheduling.

SKILL MASTERY: PSYCHOSOCIAL DOMAIN

- Transfer previously learned skills of effectively balancing multiple roles of student/parent/worker/homemaker (qualitative increase in skill complexity).
- Transfer previously learned skills of managing interpersonal relationships with fellow nursing students, instructors, and clinical staff.
- Transfer previously learned stress and time management skills (qualitative increase in skill complexity).

DEVELOPMENTAL THEORY APPLICATION

- Emphasis on more complex skill mastery requiring increased self-management skills and cognitive complexity to foster relativistic thinking (Perry).

PROGRAM COMPONENT IV: EMPLOYMENT AS A PRACTICAL NURSE

DESCRIPTION: Begin full time employment as a licensed practical nurse.

OVERARCHING TASK: Transform self-concept to accommodate completion of long term goals.

SKILL MASTERY: COGNITIVE DOMAIN

- Transfer previously learned home and time management skills such as childrearing, budgeting, homemaking, scheduling.
- Perform skills required of a practical nurse (qualitative increase in skill complexity).

SKILL MASTERY: PSYCHOSOCIAL DOMAIN

- Transfer interpersonal skills in order to establish working relationships with fellow employees.
- Transfer previously learned skill of establishing priorities among conflicting demands (qualitative increase in skill complexity).
- Transfer skill of effectively balancing roles of worker/parent/homemaker.
- Supervise support staff.

DEVELOPMENTAL THEORY APPLICATION

- Individual development is marked by changes in behavior, cognitive structures, intellectual abilities, social interactions and roles (Kitchener).
- Vectors of psychosocial development are apparent in areas of individual competence, achievement, autonomy, identity, purpose, and integrity (Chickering).
- Development is achieved through the resolution of occupational identity and commitment and a willingness to assume culturally prescribed roles of adulthood (Erikson).
- Challenges presented by new increasingly complex work roles may be seen as playing crucial roles in stimulating the cognitive structure in adulthood (Basseches).

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